



# CoC OR-506 HMIS User Manual

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*Including Policies, Procedures and Notices*

This document contains data entry procedures for the ServicePoint HMIS Database as used in CoC OR-506.

*9/23/2015*

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Version 1.0

# CoC OR-506 ServicePoint HMIS User Manual

## Contents

ServicePoint – The Order of Data Entry .....	3
Head of the Household (HoH).....	3
Annual Assessments .....	3
Exit.....	4
Dates in ServicePoint .....	4
Basic Data Entry .....	5
Create the Household (ShelterPoint and Entry/Exit Programs) .....	5
Entry Data for Entry/Exit Programs .....	6
Entry Data for ShelterPoint Check-In Programs.....	8
Exits for Entry/Exit Programs .....	10
Check-Outs for ShelterPoint Programs .....	11
Interim Reviews/HUD Verification.....	12
Adding Household Members to a Household (HH) .....	13
Adding Household Members to an Entry.....	14
When Households Change .....	15
Reports.....	16
Entry/Exit .....	16
Client Served .....	17
APR (Annual Performance Report) .....	18
APR Detail.....	20
Data Quality Reports.....	22
Length of Stay Reports .....	24
Troubleshooting.....	25
Fixing Broken Households (HH) .....	25
Changing program type .....	26
Point in Time Workflow .....	27
Sheltered Count .....	27
Unsheltered Count.....	28
Running the PIT Report in ART.....	29
Entering the PIT Count into HUD Exchange .....	30
Administrator Information.....	31
Important Notes Before Using ServicePoint.....	31
Resetting a user password in ServicePoint .....	31
HUD Universal Data Elements (UDEs).....	32

## **CoC OR-506 ServicePoint HMIS User Manual**

Appendix 1 - WashCo HMIS Policies Procedures Forms – 2011

Appendix 2 - WashCo Notice to Clients of Uses Disclosures for Posting 2011

Appendix 3 - User Agreement 2014 – WashCo

Appendix 4 - WashCo Remote Access Agreement

### ServicePoint – The Order of Data Entry

This is a quick overview of the basics needed to properly complete a client record in ServicePoint. Note that required data elements may change with updated HUD standards. For detailed instructions, please click Help in ServicePoint to load the software manual.

#### Head of the Household (HoH)

- 1) **ClientPoint** - enter the Head of Household's name. If found, click on name. If not, add.
- 2) **Assessment Date** - set the assessment to the date the client/household entered your program, or before. Best practice: backdate to the first of the month the client entered your program (i.e. if the client enrolled in your program 2/15, backdate to 2/1).
- 3) **Profile** - fill in the profile for the HoH. Questions/items in **red text** are required for proper reporting.
- 4) **Household** - At top of screen, click to expand household section (if not visible). Click on Start New Household. Add names, relationships of all household members. Note – relationship is the relationship of the person to the HoH. Date Entered should be the same as the date you used for backdating the assessment in step 2, and a household must be created even if it is a single person household!
- 5) **Add Household Data** - When done entering household data, click Save and Exit. Wait for profile to refresh. Once all household members appear in the Households Overview box, click the Add Household Data button under the HoH name/SSN (says Household Data Sharing on the left).  
A window will pop up. Make sure all family members that are entering the program are checked. Click Save and Close. This copies information that will most likely be true for the entire household (such as residence prior to program entry, race/ethnicity, homeless status, etc.) to all household members.
- 6) **Family Members' Profiles** - In the Households Overview window, click on each family member and fill in all missing data on each member's profile.
- 7) **Return to HoH** - When done entering data for family members, click on HoH in Households Overview to return to the HoH profile.
- 8) **Entry/Exit** - Click orange Entry/Exit button in the upper right of the screen. Record the date, program, and entry type. Save and Exit.

**You are now done with the client profile.**

**There are some more things you'll need to do as time goes on...**

#### Annual Assessments

**At a minimum, do the following annually:**

- 1] Record Service Transactions provided by your agency to the client/household. For Annual Progress Report (APR) reporting, you only need to record the services once (because the report counts the number of people who received the service during the year, not the number of times you provided the service). If your program needs to report on services provided more often, and you do not have another software system to record the data, you will need to actually record services as they are provided.
- 2] Update income, disabilities, insurance, and non-cash benefits sub-assessments for the household. Do so by recording an end date for the previous income/benefit, (even if it was

## CoC OR-506 ServicePoint HMIS User Manual

zero or was answered no), and then entering a new income/benefit record. Must be done this way even if it is the same type of income/benefit, but the amount has changed.

### Exit

- 1] Date the exit for the day the client exited your program.
- 2] Update the sub-assessments to reflect any changes that occurred while the person/household was in your program.
- 3] Record Service Transactions that were provided between the last update to the client record and the exit date.

### Dates in ServicePoint

When entering information into ServicePoint, it's very important to remember that it is entirely driven by dates; every report, every client record, everything, is visible or counted based on the date (and the visibility settings) the data was entered. When a report is run, one of the parameters set is the dates. This tells ServicePoint to only look at the specified type of data (entry/exit, services, etc.) that was entered between the given dates. **Thus, in almost every circumstance, it is very important to only enter information via the entry, exit, or interim.** Entering data from entry, exit, or interim automatically timestamps the data entry to the date of the entry, exit, or interim.

If information is entered, for instance, from the Assessments tab, or from the default assessment on the client profile or summary tab, that information is only seen as true **as of whatever date it was entered or backdated to**. But when an entry/exit report, or an APR is run, it looks for information to be populated as of the entry date, the exit date, or the interim. And if the data is entered after that date, it simply isn't seen by the report, causing data errors and false "null" or "missing value" entries.

### Basic Data Entry

This guide walks through the basic data entry process for both ShelterPoint and regular Entry/Exit type programs.

### Create the Household (ShelterPoint and Entry/Exit Programs)

The household creation process is the same for Entry/Exit programs and programs that use ShelterPoint.

- 1) Log in to ServicePoint. Click on ClientPoint on the left side menu.
- 2) Enter the Head of Household's name, SSN and SSN data quality and click Search.
- 3) If a match is found, bring up the record by clicking on the client name or the pencil to the left. If no matches are found (or the match is not correct), click Add New Client with this Information.
- 4) A warning will come up asking if you have looked at all possible matches. Click OK.
- 5) From the Summary tab, under Households, or from the Households tab, click Start New Household.
- 6) The Add New Household window will pop up. Indicate the household type on the drop down at the top of the page. If it is a single person household, scroll to the bottom and click Continue. If there are additional household members, repeat steps 2-4 to search for and then add all of the members of the household. Once finished adding all household members, click Continue.
- 7) You will now be in the Household Information window. Set Head of Household to Yes for the Head of Household and then indicate the relationship the other members have to the Head (i.e. son, daughter, wife, husband, etc).
- 8) Set the Joined Household Date to a date equal to, or prior to, the family's entry to your program (easy way to do it – use the first of the month of their program entry).
- 9) When done, click Save & Exit.
- 10) You will then return to the Summary or Households tab and you should see the household members listed.

### Entry Data for Entry/Exit Programs

- 1) Under Entry/Exit on the Summary tab, or on the Entry/Exit tab, click Add Entry/Exit.
- 2) At the top of the Entry Data screen, check the box next to the household type to include all family members in the entry.
- 3) Select the Entry Provider and Entry Type (note – entry type depends on program funding; check with your program manager/CoC lead/HMIS administrator if you are unsure).
- 4) Enter the entry date and time.
- 5) Click Save & Continue.
- 6) You will then be at the Entry/Exit Data window.
- 7) Complete the Entry Assessment for the Head of Household. Answer all questions to the best of your ability with the information you have. ***Remember that Don't Know and Refused means the client does not know, or refused to provide the information, not that you do not know it or didn't ask.***

a. All questions in red need to be answered every time as they apply to **Documented** HUD information. Any Data Not Collected, Incomplete, or blank (null) response counts against your program and the continuum of care. If you are a HUD funded program, these questions must be asked upon project entry. In other words, if your client self-reports alcoholism, but has no documentation, and you receive HUD dollars, then you need to answer No to the main disabilities question, and No to all the questions inside the sub-assessment. If the client can produce a document showing that his disability is HUD Certifiable, then enter a Yes for both the main question prior to entering the sub-assessment and under the HUD verification for that disability, and a No for all the rest. ***Any sub-assessment question or main question preceding a sub-assessment for which there is not documentation needs to be answered with a No.***

b. When completing the four sub-assessments (Income, Non-cash, Disability and Insurance), the easiest way to enter the data on a client for whom the data has not previously been entered (which will be obvious due to a red triangle with an exclamation point on the far right of the sub-assessment) is to click on the HUD Verification link, click No at the top of the pop-up window, and then manually enter any criteria which is true for the client. The date of the entry, exit, or interim review you are entering should be used as the date, and will auto-populate if you go in through that link.

c. If there is already a green check mark for the HUD Verification, you must go into the sub-assessment via the magnifying glass on the upper left of the sub-assessment.

d. If you have to change an existing answer from a No to a Yes, you must click on the edit pencil beside the existing open entry and enter an end date of the day prior to the entry, exit or interim review for which you are entering new information. Once the old entry is edited, close it and click on Save and Add Another, then add the new information and save. The goal for all clients is to have green check marks for HUD Verification. ***You may also enter the sub-assessments via the magnifying glass to the left of the sub-assessment, and sort the responses via the column headings.***

e. The Disabilities sub-assessment now has an option for Both Drug and Alcohol abuse. ***Please leave this as a No regardless if whether the client has both conditions.***

f. In the Non-Cash Income sub-assessment, please ***do not enter a yes for Section 8 etc.*** This is only for literal Section 8 clients, which are administered by the county.

## CoC OR-506 ServicePoint HMIS User Manual

***g. Very important: If you have indicated on the sub-assessment main question that the client does or does not have any of the criteria located within the sub-assessment, the contents of the sub-assessment must match that response: if there are no documented disabilities, for instance, then the question Does the client have a disabling condition? must be answered No. The same is true for the reverse: if a client does have a disabling condition listed in disabilities the sub-assessment, this question must be answered with a yes.***

***h. Once you have completed the HoH's entry assessment, click Save and repeat this process until all family members' assessments have been completed. For children, the only fields not already captured in client profile that are necessary to complete their entry, exit or interim assessments are relationship to HoH and the Insurance and Disability questions.***

8) When the Head of Household's entry information has been completed, if it is a single person household, click Save & Exit. If there are additional family members, click Save and follow the remaining steps.

9) Scroll back to the top of the Head of Household's entry assessment.

10) Click the Add Household Data button on the right side, near the top.

11) The Household Data Sharing window will open.

12) Check the box next to the household type to select all household members.

13) Click Save & Exit at the bottom of the Household Data Sharing window. This will copy commonly shared information to all selected household members.

14) You will then be returned to the Entry/Exit Data window. Click on the next family member listed on the left side of the screen, under Household Members. This will bring up the entry assessment for that person.

15) Complete the assessment for that family member. Once this is completed for all family members, click Save & Exit.



### Entry Data for ShelterPoint Check-In Programs

- 1) After creating the household as explained in Part 1, go to ShelterPoint and select your shelter and bedlist. Then click Client Check-In.
- 2) Click on the bed you will assign to the Head of Household. Search for your client (or enter the client ID number).
- 3) Click the green plus next to the client's name to assign them the bed.
- 4) You will then be in the Unit Entry Data screen for the Head of Household.
- 5) At the top of the screen, indicate the check-in date and time for the household (note – it will default to the current date and time).
- 6) Scroll down to Household Members.
  - a. Click Assign Unit to assign a bed to each member of the household.
  - b. Check off all household members to include them in the check-in.
- 7) Scroll down again to Entry Data and complete the assessment for the Head of Household. Complete the Entry Assessment for the Head of Household. Answer all questions to the best of your ability with the information you have. ***Remember that Don't Know and Refused means the client does not know, or refused to provide the information, not that you do not know it or didn't ask.***
  - a. All questions in red need to be answered every time as they apply to ***Documented*** HUD information. Any Data Not Collected, Incomplete, or blank (null) response counts against your program and the continuum of care. If you are a HUD funded program, these questions must be asked upon project entry. In other words, if your client self-reports alcoholism, but has no documentation, and you receive HUD dollars, then you need to answer No to the main disabilities question, and No to all the questions inside the sub-assessment. If the client can produce a document showing that his disability is HUD Certifiable, then enter a Yes for both the main question prior to entering the sub-assessment and under the HUD verification for that disability, and a No for all the rest. ***Any sub-assessment question or main question preceding a sub-assessment for which there is not documentation needs to be answered with a No.***
  - b. When completing the four sub-assessments (Income, Non-cash, Disability and Insurance), the easiest way to enter the data on a client for whom the data has not previously been entered (which will be obvious due to a red triangle with an exclamation point on the far right of the sub-assessment) is to click on the HUD Verification link, click No at the top of the pop-up window, and then manually enter any criteria which is true for the client. The date of the entry, exit, or interim review you are entering should be used as the date, and will auto-populate if you go in through that link.
  - c. If there is already a green check mark for the HUD Verification, you must go into the sub-assessment via the magnifying glass on the upper left of the sub-assessment.
  - d. If you have to change an existing answer from a No to a Yes, you must click on the edit pencil beside the existing open entry and enter an end date of the day prior to the entry, exit or interim review for which you are entering new information. Once the old entry is edited, close it and click on Save and Add Another, then add the new information and save. The goal for all clients is to have green check marks for HUD Verification. ***You may also enter the sub-assessments via the magnifying glass to the left of the sub-assessment, and sort the responses via the column headings.***

## CoC OR-506 ServicePoint HMIS User Manual

e. The Disabilities sub-assessment now has an option for Both Drug and Alcohol abuse. ***Please leave this as a No regardless if whether the client has both conditions.***

f. In the Non-Cash Income sub-assessment, please ***do not enter a yes for Section 8 etc.*** This is only for literal Section 8 clients, which are administered by the county.

g. ***Very important: If you have indicated on the sub-assessment main question that the client does or does not have any of the criteria located within the sub-assessment, the contents of the sub-assessment must match that response: if there are no documented disabilities, for instance, then the question Does the client have a disabling condition? must be answered No. The same is true for the reverse: if a client does have a disabling condition listed in disabilities the sub-assessment, this question must be answered with a yes.***

h. Once you have completed the HoH's entry assessment, click Save and repeat this process until all family members' assessments have been completed. ***For children, the only fields not already captured in client profile that are necessary to complete their entry, exit or interim assessments are relationship to HoH and the Insurance and Disability questions.***

8) When done, scroll to the bottom and click Save. (Note – if this is a single person household, you may click Save & Exit – you're all done!).

9) Scroll up to Household Sharing and click Add Household Data to bring up the Household Data Sharing window.

10) Check the box next to the household type to select all household members.

11) Click Save & Exit at the bottom of the Household Data Sharing window. This will copy commonly shared information to all selected household members.

12) You will then be returned to the Unit Stay Entry Data screen for the Head of Household. Click Save & Exit at the bottom of the screen.

13) This will return you to your bedlist. Click the name of the next family member to bring up the Unit Entry Data screen for that person.

14) Scroll to Entry Data and complete the assessment for the family member. When done, click Save & Exit at the bottom of the screen.

15) Repeat steps 13-14 until the entry assessments have been completed for all family members.

### Exits for Entry/Exit Programs

- 1) Look up Head of Household.
- 2) Under Entry/Exit on the Summary tab, or from the Entry/Exit tab, click the pencil next to the blank Exit Date.
- 3) The Edit Exit Data window will open.
- 4) Check the box next to the household type to select all family members.
- 5) Indicate the date of exit, the reason for exit (note – do not select anything ending in HOPWA unless your program is HOPWA funded), and the destination.
- 6) Click Save & Continue.
- 7) Update information on the Exit assessment to reflect the client's situation at exit and click Save. For example, if the client is leaving to subsidized housing and now has a job, the exit should reflect that they are no longer homeless, have income, and have a voucher:  
***Note – use Add Household Data on the exit screen to update the housing and homeless status of all family members, just like you do at program entry!***
- 8) When done, click Save and complete the exit assessment for all family members (listed on left side of screen). When updates have been completed for all household members, click Save & Exit. You are done!

### Check-Outs for ShelterPoint Programs

- 1) Go to ShelterPoint. Select your shelter and bed list.
- 2) Click Client Check-In.
- 3) Locate the Head of Household on the bedlist and click the red minus symbol icon on the left side of the screen (note – when hovered over, the text Check Out will appear).
- 4) The Unit Exit Data window will come up.
- 5) Indicate the date and time of check-out at the top of the screen (note it defaults to the current date/time).
- 6) Select the reason for leaving and destination. (Note – do not select any items ending in HOPWA unless your program is HOPWA funded).
- 7) Under Household Members, check the box next to the household type to select all members of the household.
- 8) Update the Exit Assessment for the Head of Household. The data on the Exit Assessment should reflect any changes that have happened (i.e. housing status, income, non-cash benefits, etc.) since the last Annual Assessment. When done, click Save.
- Note – use Add Household Data on the check-out screen to update the housing and homeless status of all family members, just like you do at program entry!*
- 9) When done, click Save & Exit.
- 10) You will return to your bedlist and the beds will now show EMPTY.
- 11) Note – if anyone other than the head of household had changes in income, disabilities, insurance or non-cash benefits that need to be recorded for the exit, go to the Summary tab or Entry/Exit tab and click on the pencil next to the exit date. Click on the family member's name on the left side and then update their exit information.
- 12) Now you're done!

## CoC OR-506 ServicePoint HMIS User Manual

### Interim Reviews/HUD Verification

HMIS Data Standards currently require that income and non-cash benefit information be updated for program participants at program exit, or annually, whichever comes first. If your program serves clients for a year or longer, there is a very easy mechanism built into ServicePoint to help you update this information – **Interim Reviews**. These are meant to be used during program participation to update income, non-cash benefit, insurance, and disability data. **Follow-ups** are meant to be used after program participation, to track client success after program exit (this is not currently required, but is available to you if you choose to use it). These instructions will focus on using the **Annual Assessments** function in ServicePoint.

- 1) Log in to ServicePoint and look your client up by name or client ID number.
- 2) Once in the client record, click on the Entry/Exit tab.
- 3) On the Entry/Exit tab, look for the Interims column and click the Interim icon (looks like a paper checklist) for your program.
- 4) Click the Add Interim Review button and check off all family members and indicate the review type (Annual is the only one that matters for APR reporting) and the date/time the review is effective. Then click Save & Continue.
- 5) At the top of the Interim Review assessment, you will see the review date and time reflected – this means that all information you enter in this assessment will be date stamped with the review date and time (no need to backdate!).
- 6) If any client information has changed, update the assessment. The most common changes are in the income, insurance, or non-cash benefits sub-assessments. Enter the sub-assessment by clicking on the magnifying glass to the top left and update the line items as necessary. **Remember that if a line item changes, you must enter an end date for the previous open item and then add a new line item.** Complete the changes in each sub-assessment.
- 7) Next, scroll through the rest of the assessment and update any information that changed. Click Save when done with the first household member's update.
- 8) If there are more people in the household, they will be listed on the left side of the Interim Review window. Once the assessment has been saved for a family member, the checkmark will turn green. A gray check means the review has not yet been completed for that family member.
- 9) Click each family member and update the assessment for them.
- 10) If there are not changes, still click on each family member and save so that you have completed the required review for all family members.

**Note – you can use the Interim feature to update income, benefit, or disability information at any time while the client is in your program!**

### Adding Household Members to a Household (HH)

Client households change frequently, and to ensure data integrity, HMIS users need to keep up with these changes as we become aware of them.

- 1) In ClientPoint, go into a client for which the relevant HH has already been setup.
- 2) Click on the Households tab along the top of the client record.
- 3) In the relevant HH, click on Manage Household.
- 4) After ensuring that the HH type and Head of Household (HoH) are accurate, review the current HH members. ***If the HH type is changing, or should have been changed, delete the client from the old HH and create a new HH as detailed above in [Create the Household](#). Changing the HH type will change historical reporting. In other words, if this was a single individual and you change the type to Single Female Parent because she had a baby, historical reporting on her will report a Female Single Parent. Therefore, it's far better to create a new HH than it is change the type, unless the type was made in error.***
- 5) Once you know the HH created is accurate, click on Add /Delete Household Members.
- 6) In the popup, click on the drop down menu for Add Clients to the Household.
- 7) Enter the clients name and click search. If the client has already been created, he or she should show up here. If not, you will need to enter all relevant data, backdating to at least the day prior to the HH change.
- 8) Once the search is completed, click on the green plus sign next to the new client.
- 9) Click Continue.
- 10) In the popup, select the appropriate Relationship to Head of Household and the ***accurate date client entered the HH.***
- 11) Click Exit.

### Adding Household Members to an Entry

Often, a new household member will be added after the initial project entry. This can be due to a birth, a parent getting their parental rights returned, or several other reasons. When this occurs, the entry needs to be edited to reflect the changes.

- 1) In ClientPoint, go to the Head of Household's (HoH) client record.
- 2) Under Entry/Exits, click on the edit pencil to the left of your project's entry date.
- 3) Click Include Additional Household Members.
- 4) Check the HH members you want to add and click Continue.
- 5) Click Save and Continue. ***It's very important that you do not change the entry date here.***
- 6) The new family member is now entered into the entry.
- 7) If the new family member entered the project on the same date as the rest of the HH, complete the entry assessment as described above in [Entry Data for Entry/Exit Programs](#).
- 8) If the new family member entered the project after the rest of the family, you will need to edit his or her entry date.
- 9) Click on the pencil to the left of the new HH member's entry date.
- 10) Edit the entry date and click Save and Continue. – ***Notice it defaults to only the HH member you are updating.***
- 11) Complete the entry assessment for the new HH member.

## CoC OR-506 ServicePoint HMIS User Manual

### When Households Change

There are times when the entire composition of the household changes, for instance; if a two-parent household becomes a single individual. When this occurs, the following needs to be changed for any client still receiving services.

- 1) In the Household tab, create a new household for the client(s) who will be member(s) of the new household.
- 2) Once the new household has been created, exit the clients that are leaving the household from the prior household by clicking on the minus sign in the red circle to the left of each client, dating for the date before the entry into the new household.
- 3) Before saving your changes, make sure the new household has the correct type, members and entry dates, and that each client has the relationship to head-of-household completed.



### Reports

ServicePoint provides several reports to check the quality and integrity of data. Often, we notice something is awry with a client or agency's data, but have a difficult time determining exactly where the error lies. The following reports provide a way to look at specific projects and time frames to help narrow down the issues. ***Please note that the APR, the APR Detail and the Data Quality reports can only be run by a user with an ART license, but can be provided to agencies by either the Agency or CoC HMIS Administrator as desired.*** The reports folder can be found to the left of the ServicePoint navigation screen near the bottom.

### Entry/Exit

- 1) Click on the Entry/Exit Report in the Reports folder.
- 2) Unless applicable, do not click on the Reporting Group button.
- 3) Select the appropriate provider.
- 4) The default is that only the provider selected is run. If you instead want to see all clients active in any project your agency offers, select your main agency HMIS Provider and select The provider and its subordinates.
- 5) Select desired date range. This can be for several years or for a day, as you choose. To look at the current day, enter the previous day as the start date and today as the end date.
- 6) Legal adult age is 18 as used in this CoC.
- 7) Select Entry/Exit type. This can be HUD, Basic, Basic Center Program, VA, etc. If unsure, ask your agency administrator.
- 8) Click Build Report.

The great thing about this report is that you can click on the hyperlink number in a specific count and it will show you which clients those numbers represent. The unfortunate thing about this report is that it was created a long time ago, and many of the criteria shown are mapping to outdated fields in ServicePoint. In other words, some fields represented in this report have had the actual field value changed to a different value, so they are no longer accurate. ***This report should ONLY be used to look at client enrollment (questions 2-3). Other fields have an inherent lack of data integrity.***

\*Please note: When you select the incorrect Type upon client entry, other HMIS reports can show clients entered in the incorrect and correct type. For example, if the BGA Safe Place standard is to use Basic Entry Type, and someone accidentally selects Basic Center Program Entry/Exit when entering a specific client, that client will not show up on reports run for BGA Safe Place. This is because when a report is run, the report type is always asked, and the one selected is the one that agency or project has selected or been asked to use based on their funding or services. So if a client is entered into the incorrect program type, the entry and data for that client is not counted.

## CoC OR-506 ServicePoint HMIS User Manual

### Client Served

The client served report is similar to the Entry/Exit report, but it reports clients receiving services rather than clients entered into a project.

- 1) Click on the Client Served Report in the Reports folder.
- 2) Unless applicable, do not click on the Reporting Group button.
- 3) Select the appropriate provider.
- 4) The default is that only the provider selected is run. If you instead want to see all clients active in any project your agency offers, select your main agency HMIS Provider and select The provider and its subordinates.
- 5) Select the services for which you want a report.
- 6) Select how you would like the clients to be grouped.
- 7) If desired, select a funding source on which you want to report.
- 8) Select the appropriate Service Code using the Lookup function if necessary.
- 9) Select desired date range. This can be for several years or for a day, as you choose. To look at the current day, enter the previous day as the start date and today as the end date.
- 10) If you wish to look only at clients served before a specific date range, enter that date range in Served Before Date Range.
- 11) In most cases, you should leave the Treat Open-Ended Services/Referrals as 1-day Services section as-is.
- 12) Legal adult age is 18 as used in this CoC.
- 13) Click Build Report.

### APR (Annual Performance Report)

The APR is a report that required annually from any HUD-funded CoC project, and is a summary of what occurred in a project during the timeframe selected.. While the report only needs to be filed annually, the information contained within is useful in determining whether the data entered matches what the agency knows to be true for the project. ***This report is only available to those with an ART license. If you do not have an ART license but believe it could be useful, please speak with either your supervisor or the person at your agency responsible for software licensing.***

- 1) Click on ART at the bottom of the Reports folder.
- 2) In the main window, ART Browser, click on the drop-down for the Public Folder, and then click on the drop down for Continuum of Care Reports.
- 3) Click on the magnifying glass next to 0625 - HUD CoC APR. ***The versions change, so won't be entered in this manual.***
- At this point, there are a few choices on how to run the report depending on your preferences and/or ART license type. For ease of use, this manual will focus on scheduling ART reports.***
- 4) Click on Schedule Report.
- 5) In the pop-up, click on either provider group or provider type.
- 6) Click Select, and type in a key word to find your provider or provider group. ***It takes a few moments to load, so let it finish loading before clicking the Search button.***
- 7) Click the red minus sign next to None Selected to remove it from the report, and click Search.
- 8) When the search results are shown, click the green plus sign next to the once you wish to select
- 9) In the popup, click Submit.
- 10) Click on Enter Start Date.
- 11) In the popup, enter the applicable date. If it's for an APR, it will be the first day of the grant. If using the APR for data quality, it will be the first day of the time period for which you want to report. Click on PM to change it to read AM.
- 12) Click on Enter End Date PLUS One Day.
- 13) As indicated, you need to add a day to the reporting period. For example, if your grant period is 9/1/14 – 8/30/15, you would enter 9/1/15 in this field. Click on PM to change it to read AM.
- 14) Click on Select Entry Type, and click Select on the popup..
- 15) In the popup, after it finishes loading, click on HUD, or Basic, etc., whichever type is used by your project , and click Submit.
- 16) Scroll down to Enter Effective Date, and select.
- 17) Enter the date you entered for Enter End Date PLUS One Day.
- 18) Scroll to the bottom of the popup and click on Is using the Receiving Income Source etc.
- 19) Click Select, and once it finishes loading, select Yes and click Submit.
- 20) Do the same for the remaining three options, unless specifically told not to by your agency.
- 21) Click Next.
- 22) In the popup, you may change the name of the report if you wish. A good practice is to add the project name at the beginning.
- 23) In Report Format, select whether you wish the report to be in pdf or Excel format. ***Best practice is to create this report as a pdf.***
- 24) Under Interval, select how often you would like this exact report run. ***If running this report for an annual APR, it's often helpful to set it to run daily, so that you can re-check it after data has been edited.***

***Note: If a report is set to run more than once, it will do so with the same dates originally entered. If you wish to have the report run monthly, for instance, with each report showing a different time interval, you must recreate the entire report each time.***

## CoC OR-506 ServicePoint HMIS User Manual

25) Under Start Date, this is the date you wish the report to be run, not the dates the report is capturing. ***If you need this report to be run more than once, it's good practice to set it to sometime between 3:15 and 4am daily, as ART refreshes at midnight and isn't finished refreshing until after 3am.*** If it takes you a minute or more to finish with this popup, it's a good idea to set the time for a couple minutes into the future, so by the time you hit the Submit button, the start time hasn't already passed.

26) For End Date, select the date you wish the report to run until, ***or*** if only running it once, just make sure the end date and time are after the start date and time. This is especially important if you have set the start time into the future, or you will be telling the report to end before it starts.

27) Click Submit.

28) In your Scheduled Reports section in ART, at the bottom, there is a refresh button. If you click it, you should see the new report pending.

29) After giving the report some time to run (it can take from one to 15 minutes, depending on the report), scroll up to your ART Inbox. If it's already open, click it closed and then open again so the folder can refresh.

30) Once the report is completed, click on the magnifying glass next to it in the Inbox.

31) In the popup, select Download.

32) In the new popup, select whether you would like to open or save the report, and click OK.

## CoC OR-506 ServicePoint HMIS User Manual

### APR Detail

The APR Detail Report is similar to the APR Report, except rather than a summary of all client data, it shows a breakdown of each client and the relevant HMIS responses for each.

- 1) Click on ART at the bottom of the Reports folder.
- 2) In the main window, ART Browser, click on the drop-down for the Public Folder, and then click on the drop down for Continuum of Care Reports.
- 3) Click on the magnifying glass next to 0631 - HUD CoC APR Detail. ***The versions change, so won't be entered in this manual.***

***At this point, there are a few choices on how to run the report depending on your preferences and/or ART license type. For ease of use, this manual will focus on scheduling ART reports.***

- 4) Click on Schedule Report.
  - 5) In the pop-up, click on either provider group or provider type.
  - 6) Click Select, and type in a key word to find your provider or provider group. ***It takes a few moments to load, so let it finish loading before clicking the Search button.***
  - 7) Click the red minus sign next to None Selected to remove it from the report, and click Search.
  - 8) When the search results are shown, click the green plus sign next to the one you wish to select
  - 9) In the popup, click Submit.
  - 10) Click on Enter Start Date.
  - 11) In the popup, enter the applicable date. If it's for an APR, it will be the first day of the grant. If using the APR for data quality, it will be the first day of the time period for which you want to report. Click on PM to change it to read AM.
  - 12) Click on Enter End Date PLUS One Day.
  - 13) As indicated, you need to add a day to the reporting period. For example, if your grant period is 9/1/14 – 8/30/15, you would enter 9/1/15 in this field. Click on PM to change it to read AM.
  - 14) Click on Select Entry Type, and click Select on the popup..
  - 15) In the popup, after it finishes loading, click on HUD, or Basic, etc., whichever type is used by your project, and click Submit.
  - 16) Scroll down to Enter Effective Date, and select.
  - 17) Enter the date you entered for Enter End Date PLUS One Day.
  - 18) Scroll to the bottom of the popup and click on Is using the Receiving Income Source etc.
  - 19) Click Select, and once it finishes loading, select Yes and click Submit.
  - 20) Do the same for the remaining three options, unless specifically told not to by your agency.
  - 21) Click Next.
  - 22) In the popup, you may change the name of the report if you wish. A good practice is to add the project name at the beginning.
  - 23) In Report Format, select whether you wish the report to be in pdf or Excel format. ***Best practice is to create this report as a pdf.***
  - 24) Under Interval, select how often you would like this exact report run. ***If running this report for an annual APR, it's often helpful to set it to run daily, so that you can re-check it after data has been edited.***
- Note: If a report is set to run more than once, it will do so with the same dates originally entered. If you wish to have the report run monthly, for instance, with each report showing a different time interval, you must recreate the entire report each time.***
- 25) Under Start Date, this is the date you wish the report to be run, not the dates the report is capturing. ***If you need this report to be run more than once, it's good practice to set it to sometime between 3:15 and 4am daily, as ART refreshes at midnight and isn't finished refreshing until after 3am.*** If it takes you a minute or more to finish with this popup, it's a good idea to set the time for a couple minutes into the future, so by the time you hit the Submit button, the start time hasn't already passed.

## CoC OR-506 ServicePoint HMIS User Manual

- 26) For End Date, select the date you wish the report to run until, **or** if only running it once, just make sure the end date and time are after the start date and time. This is especially important if you have set the start time into the future, or you will be telling the report to end before it starts.
- 27) Click Submit.
- 28) In your Scheduled Reports section in ART, at the bottom, there is a refresh button. If you click it, you should see the new report pending.
- 29) After giving the report some time to run (it can take from one to 15 minutes, depending on the report), scroll up to your ART Inbox. If it's already open, click it closed and then open again so the folder can refresh.
- 30) Once the report is completed, click on the magnifying glass next to it in the Inbox.
- 31) In the popup, select Download.
- 32) In the new popup, select whether you would like to open or save the report, and click OK.
- 33) This report will allow the user to view missing or inaccurate information by client, so that any client showing incorrect information can be fixed.

### Data Quality Reports

There are several Data Quality reports in ART, but the easiest to use is the 0252 - Data Completeness Report Card (EE). This can be run using either one project's Entry/Exit data, or for a Provider Group, using the [PG] option.

- 1) Click on ART at the bottom of the Reports folder.
- 2) In the main window, ART Browser, click on the drop-down for the Public Folder, and then click on the drop down for Data Quality.
- 3) Click on the magnifying glass next to 0252 - Data Completeness Report Card (EE). ***The versions change, so won't be entered in this manual.***
- At this point, there are a few choices on how to run the report depending on your preferences and/or ART license type. For ease of use, this manual will focus on scheduling ART reports.***
- 4) Click on Schedule Report.
- 5) In the pop-up, click on Enter Start Date.
- 6) Enter the first day of the time period for which you want to report. Click on PM to change it to read AM.
- 7) Click on Enter End Date PLUS One Day.
- 8) As indicated, you need to add a day to the reporting period. For example, if your reporting period is 9/1/14 – 8/30/15, you would enter 9/1/15 in this field. Click on PM to change it to read AM.
- 9) Click Select Provider (Provider Group, if running the PG version).
- 10) Click Select, and type in a key word to find your provider or provider group. ***It takes a few moments to load, so let it finish loading before clicking the Search button.***
- 11) Click the red minus sign next to None Selected to remove it from the report, and click Search.
- 12) When the search results are shown, click the green plus sign next to the one you wish to select
- 13) Click on Include Services in Report Card?
- 14) Click Select.
- 15) If your project enters services provided, click on the green plus sign next to Yes. If not, click on the green plus sign next to No. Click Submit.
- 16) In the popup, you may change the name of the report if you wish. A good practice is to add the project name at the beginning.
- 17) In Report Format, select whether you wish the report to be in pdf or Excel format. ***Best practice is to create this report as a pdf.***
- 18) Under Interval, select how often you would like this exact report run. ***If running this report for an annual APR, it's often helpful to set it to run daily, so that you can re-check it after data has been edited.***
- Note: If a report is set to run more than once, it will do so with the same dates originally entered. If you wish to have the report run monthly, for instance, with each report showing a different time interval, you must recreate the entire report each time.***
- 19) Under Start Date, this is the date you wish the report to be run, not the dates the report is capturing. ***If you need this report to be run more than once, it's good practice to set it to sometime between 3:15 and 4am daily, as ART refreshes at midnight and isn't finished refreshing until after 3am.*** If it takes you a minute or more to finish with this popup, it's a good idea to set the time for a couple minutes into the future, so by the time you hit the Submit button, the start time hasn't already passed.
- 20) For End Date, select the date you wish the report to run until, ***or*** if only running it once, just make sure the end date and time are after the start date and time. This is especially important if you have set the start time into the future, or you will be telling the report to end before it starts.
- 21) Click Submit.

## CoC OR-506 ServicePoint HMIS User Manual

- 22) In your Scheduled Reports section in ART, at the bottom, there is a refresh button. If you click it, you should see the new report pending.
- 23) After giving the report some time to run (it can take from one to 15 minutes, depending on the report), scroll up to your ART Inbox. If it's already open, click it closed and then open again so the folder can refresh.
- 24) Once the report is completed, click on the magnifying glass next to it in the Inbox.
- 25) In the popup, select Download.
- 26) In the new popup, select whether you would like to open or save the report, and click OK.



## CoC OR-506 ServicePoint HMIS User Manual

### Length of Stay Reports

Often throughout the year, there is a need to run a Length of Stay Report. This report looks at the date the client first entered a specific type of housing and the date they left for the last time. In other words, if they entered SafePlace, exited, and entered CAO Family Shelter, it will show the length from the first entry into SafePlace to the last exit from CAO. It will do this for all types of programs, but the most common are Emergency Shelter, Transitional Housing, Rapid Rehousing and Permanent Supportive Housing. The report can be found in ART>Public Folder>Washington County> Original First Entry and Final Exit for LOS – ES.

- 1) Double-click on the report to open it, and select Schedule Report.
- 2) Select the Provider(s) for which you wish to run the report, click Submit.
- 3) Enter the first day you want the report to capture, and click Submit.
- 4) Enter the last day, adding one day, and click Submit.
- 5) Once run, evaluate the report. The Read Me tab explains what each tab provides, and the report even shows exits to permanent housing.

### Troubleshooting

This section is intended to assist the user in determining why reports are not showing the data entered as expected. ***This is not a comprehensive guide to fixing all data issues in ServicePoint HMIS. There are many potential problems that occur; these are only the most common.***

#### Fixing Broken Households (HH)

Often, a project's availability or the amount of households enrolled in a project shows more HHs than expected. When this occurs, the following steps should be taken.

- 1) [Run an Entry/Exit Report](#) as described above.
- 2) Once the report is run, review the amount of singles and individuals entered. The numbers are hyperlinks that show which clients are represented in each portion of the report.
- 3) If, for instance, you have a child showing as an Individual, the child is not entered into his or her HH and project entry correctly. Another red flag is one family member showing as an individual, apart from the rest of the family. Both these issues are touched upon below.
- 4) Note who is showing up in incorrect family types. If there are several, download the report via the button on the bottom of the popup and view the list as a spreadsheet.
- 5) For each client incorrectly sorted, go into their Client Record in ClientPoint.
- 6) Once in the client record, click on the Households tab along the top.
- 7) Review the family composition, including how many members are represented, relationship to Head of Household, and date they entered the household.
- 8) Review the HH composition to determine the error.
- 9) Edit as described above in [Adding Household Members to a Household](#) and [Adding Family Members to an Entry](#).
- 10) Once the HH has been fixed, run an Entry/Exit report to verify the change as described in [Entry/Exit](#)

## CoC OR-506 ServicePoint HMIS User Manual

### Changing program type

When a client is accidentally entered into an incorrect program type, the program type needs to be changed to the correct type to show up properly in reporting.

- 1) In the client record, click on the edit pencil to the left of the project Entry Date.
- 2) Click Save and Continue.
- 3) At the top, under the Type drop down, select the correct project type.
- 4) Click Update.
- 5) Scroll to the bottom and click Save and Exit.

## CoC OR-506 ServicePoint HMIS User Manual

### Point in Time Workflow

The Point in Time (PIT) count is an annual process by which the CoC collects data on all clients considered homeless on the third Wednesday in January. The process is standardized for the whole state of Oregon, and each CoC collects their individual data and submits it to the HMIS lead for the implementation; currently, this is Wendy Smith at the Portland Housing Bureau. There are two types of homeless that are counted; sheltered and unsheltered. The process for counting each is specific and detailed.

The HIC, or Homeless Inventory Count, counts all beds available in the continuum. To get these numbers, the HMIS Admin will run the ART report in the Washington County folder called WashCo - Program Daily Census. This will give a preliminary draft of the numbers captured. Send to providers so they can check and verify the counts.

### Sheltered Count

In order to count those clients that are sheltered, we request that each Emergency Shelter, Transitional Housing and Safe Haven completes the “One Night Homeless Count – WashCo” assessment for each client which will be in the project as of the last Wednesday in January, including projects that do not use HMIS. Currently, this includes Jubilee Transitional Housing, Monika’s House, Mary Mac House, and Fresh Start Recovery Housing. *The information for these programs needs to be gathered from the agencies that run them and entered separately into HMIS “placeholder” providers set up for this purpose.* Historically, Community Action collects and enters Jubilee and Fresh Start clients, and the Washington County HMIS Administrator runs a report in the HMIS Comp site called WashCo-PIT in ReportWriter and enters the data in a format which is altered to prohibit client identification.

\*Data from Comp site is gathered by the CoC HMIS administrator by running the WashCo PIT report via ReportWriter for both Monika’s House and Mary Mac House. Once the information is gathered, it is converted into the following format: Self becomes Aclientid and subsequent HH members become Bclientid etc. The HH id becomes the last name for clients in the HH. Once the data is converted, these clients and households need to be created into HMIS and entered into the appropriate “placeholder” provider with the PIT as the entry date, and the following day as the exit date.

To assist users with the verification of accurate data, the report [Entry/Exit Report](#) may be used for a one-day span including the PIT date. This will not give all the necessary data, but will allow HMIS users to accurately see how many people are receiving services in their facility at any given time. *This report should be used as a tool to ensure that anyone who **was** receiving shelter services but **does not show up in the Entry/Exit report** is entered into the appropriate program on the appropriate date.*

1) Emails are sent to HMIS users in participating projects starting the first of January to remind people to ensure the data entered for all clients in their project is entered and accurate. *Note – this is in addition to regular data quality reports sent to assist them in ensuring data accuracy and integrity.* The HMIS users are also instructed to complete the “One Night Homeless Count – WashCo” assessment for each client which will be in the project as of the last Wednesday in January. *When this data is entered after the fact, HMIS users need to back-date the entry to ensure it is effective as of the date prior to the PIT.*

2) To complete the One Night Homeless Count – WashCo, the agency HMIS user must first open the client record in HMIS.

## CoC OR-506 ServicePoint HMIS User Manual

- 3) If the homeless assessment is being completed **before** the PIT date, the user need only click on the pencil icon to the left of the client's entry date to your program. The Entry screen will pop open. Make sure all family members' names are checked at the top of the screen.
- 4) Click Save & Continue, and the Entry Assessment will then load on the Entry screen.
- 5) At the top of the Entry Assessment, you should see Household Data Sharing. Click the "Add Household Data" button under Household Data Sharing. Note – if you do not see Household Data Sharing at the top of your entry assessment, call/email me and I will add this for you.
- 6) Check off all family members' names at the top of the Household Data Sharing window and scroll down to where you see "ONHC Homeless Count – START HERE."
- 7) Answer the questions as follows:
  - a. Length in months: select the range that best fits the approximate length of time the family/person has been homeless.
  - b. What shelter service is being provided? Select Emergency Shelter, Transitional Housing, or Safe Haven (remember – these instructions are just for sheltered persons, so it should be one of these).
  - c. Service McKinney-Vento Funded? Answer yes if your program receives Continuum of Care HUD funds; answer no if your program does not receive funding through the Continuum of Care. If unsure, check with Annette Evans.
  - d. CAA/Lead Agency: CAO Washington County
  - e. OHCS State Program ID and OHCS State Program ID2: Find the name of your agency or shelter in one of these two lists. If your agency/shelter is not listed, please notify me so it can be added. You should have a program selected only in one of these two boxes (not in both).
  - f. Program Type: select the appropriate program type.
  - g. Current County of Residence: Washington
  - h. City: Not required for the Washington County homeless count, but you are welcome to type in the name of the city where the family is residing.
- 8) When all done, click Save & Exit.
- 9) Go to the first member of the next household on your list and repeat these steps. Continue until this process has been done for everyone in your emergency housing programs the last Wednesday of January.

### Unsheltered Count

For those clients who are not receiving services from a shelter on the date of the PIT, there is a different protocol that *must be done correctly in order to be counted*. The unsheltered count is usually done by Community Action, Org. in association with outreach workers from HomePlate and Luke-Dorf, Inc. Those trained will conduct outreach using a paper copy of the One Night Homeless Count assessment, and this data will then be entered as follows. Washington County Community Corrections and Washington County Jail also submit paper forms for those under their jurisdiction on the night of the count. This data is entered by Community Action staff.

- 1) First backdate ServicePoint to the date prior to the PIT date. Do this by clicking on the Back Date link in the upper right corner of your ServicePoint login, and select the appropriate date.
- 2) Search for the client in ServicePoint, and if the client already exists in ServicePoint, open the client record.
- 3) If the client doesn't already exist, create a new household following the steps provided in [Create the Household](#).
- 4) Once the new client and household have been created, go to the Service Transactions tab and select Add Need.
- 5) Select CAO – Homeless Count (2818), and enter the information as follows:
  - a. Need = Emergency Shelter

## CoC OR-506 ServicePoint HMIS User Manual

- b. Date of Need = 01/27/2015
  - c. Need Status = Closed
  - d. Outcome of Need = Not Met, Click "Save & Exit"
  - 6) Add Information from paper form for all household members:
    - a. Enter through the Assessment Tab and select "One Night Homeless Count (WashCo)," and click Filter.
    - b. Enter data.
- \* Failure to answer some questions can result in the data not being counted, and without an accurate count of the homeless population, the county may not receive the appropriate amount of funding.*
- \*\*When entering data from schools, for those doubled-up, enter data as shown below (with correct school district indicated).**

The screenshot shows a web browser window with the URL <https://portland.servicept.com/com.bov>. The page title is "Client Profile - ServicePoint". The form contains the following fields and values:

Field	Value
Hmis due to: Manut. Home Park Closure	-Select-
Foreclosure?	-Select-
Other Hmis Reason:	didn't disclose
Service McKinney-Vento funded?	Yes
What shelter service is being provided?	Service was not available (Turn Away*)
CAA/Lead Agency	CAO Washington County
OHCS State Program ID	Beaverton School District - CAO
OHCS State Program ID2	-Select-
Program Type	Homeless Outreach
Current County of Residence:	Washington

Buttons at the bottom: "Print Assessment" and "Save".

### Running the PIT Report in ART

Once all assessments and needs have been completed, the HMIS Administrator will run the PIT Report for the whole continuum.

The report is located in ART>Public Folder>Point in Time>0630 - Sheltered-Unsheltered PIT 2015. *Use the most recent version available.*

- 1) Double-click on the report to schedule it, and select from the prompts as follows:
  - a. Select Provider(s): Select your ES, TH or SH programs including your One Night Homeless Count (ONHC) providers if needed.
  - b. Select Provider CoC Code(s): Or 506
  - c. Effective date: This is best used as the end date of the report
  - d. Enter PIT Date: your PIT night
  - e. Enter PIT Date PLUS 1 Day: your PIT night, plus one day
  - f. Include Entry/Exits from ES Data: Yes
  - g. Include Service/Shelters from ES Data: No

## CoC OR-506 ServicePoint HMIS User Manual

- 2) Once report is run, there are things to look for:
  - a. Using the Tab C – Client Detail Tab, review your client list and either enter or exit clients, so the report is accurate.
  - b. Correct any key missing data
  - c. Review your Program Type – is it correct?
  - d. Using the Tab E – Additional Information Tab, review your counts – do the households make sense? In other words, if you are a singles only shelter, were there families entered?
  - e. Review your counts – how does this number compare to your capacity?

### Entering the PIT Count into HUD Exchange

Once the information has been reviewed and the HMIS Administrator has determined it is accurate, the data is entered into the HUD Exchange, <http://www.hudhdx.info/Default.aspx?home>. If the HMIS Administrator does not yet have an account with the HUD Exchange, one must be created following the steps on the webpage.

- 1) In the HUD Exchange, click on PIT in the upper left. This will take you to the PIT data entry page.
- 2) Enter the data as is appears in the ART report, and submit when finished.

### Administrator Information

As an HMIS administrator, there are specific tasks and concerns which are important to understand.

### Important Notes Before Using ServicePoint

An administrator has access to aspects of the database that others do not. As such, when data is entered, it's at a different level than other users, and confuses the system. Therefore, *when entering client data, it's very important that an agency-level user is shadowed in the appropriate provider.*

Failure to do so can cause many data integrity issues, including Entry/Exit data showing as Missing or Incorrect in Data Quality Reports or APRs.

### Resetting a user password in ServicePoint

- 1) Once logged into ServicePoint, click on arrow next to Admin in the left navigation pane and select User Admin.
- 2) Type the name of the user who needs assistance, click Search.
- 3) Select that user from the list that appears.
- 4) Under Consecutive Bad Logins, if it says 3, click Reset – if not, go to step 5.
- 5) Click Generate Password.
- 6) Once a new password appears, select it and delete it, typing in password123.
- 7) Click save and exit, and inform your user of the new password.



### HUD Universal Data Elements (UDEs)

In order for HUD to ask for and receive the same data from all organizations receiving HUD funding, universal data elements had to be created. The data elements are the same across all jurisdictions and organizations, and are defined in detail in the [HMIS Data Standards Manual](#). ***The answers to these questions are required for every HMIS project, and greatly affect how the continuum scores in competition for HUD grant funding.*** All of these questions are on the entry assessments for each project requiring them. Other questions are required by HUD for some projects, and they are on the entry assessments for those projects.

The current version is 2014, but it changes or is updated frequently, so it's a good idea to Google the manual and click on the link to the most recent version.

The HUD UDEs are as follows, with explanations for those requiring it.

- 3.1 Name
- 3.2 Social Security Number
- 3.3 Date of Birth
- 3.4 Race – **If more than one race, select it in the Secondary Race field. Otherwise leave blank.**
- 3.5 Ethnicity
- 3.6 Gender
- 3.7 Veteran Status
- 3.8 Disabling Condition – **It is necessary to answer the question and complete the HUD Verification Sub-assessment.**
- 3.9 Residence Prior to Project Entry
- 3.10 Project Entry Date – **This is entered upon project entry.**
- 3.11 Project Exit Date – **This is entered upon project exit.**
- 3.12 Destination – **This is entered upon project exit.**
- 3.13 Personal ID – **SOFTWARE GENERATED**
- 3.14 Household ID – **SOFTWARE GENERATED**
- 3.15 Relationship to Head of Household
- 3.16 Client Location – **In Washington County, this will be CoC 506 etc.**
- 3.17 Length of Time on Street, in an ES or Safe Haven – **This is a combination of these five questions:**
  - Client entering from the streets, ES or SH**
  - If Yes for "Client entering from streets, ES or SH" Approximate date started: [Date Field]**
  - Regardless of where they stayed last night - Number of times the client has been on the streets, in ES, or SH in the past three years including today**
  - Total number of months homeless on the street, in ES or SH in the past three years**

## Washington County, Oregon Continuum of Care Agency Participation Agreement

**This Agreement is entered into on 07/01/2011 (mm/dd/YYYY) between the Washington County, Oregon Department of Housing Services (WCDHS) and «OrgName» (Organization Name) (Participant).**

NW Social Service Connections (NWSSC) is the administrative entity that governs a multiple key stakeholder<sup>1</sup> implementation of Management Information System (CMIS/HMIS) used to record and share information among service-providers on services provided to homeless and near homeless Clients. The NWSSC CMIS/HMIS system of choice is ServicePoint. ServicePoint (trademarked and copyrighted by Bowman Systems) is an information system that provides standardized assessment of a Client's needs, creates individualized service plans and records the use of housing and services which communities can use to determine the utilization of services of participating Service Providers, identify gaps in the local service continuum and develop outcome measurements.

The City of Portland, Portland Housing Bureau (PHB) is the owner and operator of the NWSSC CMIS/HMIS and serves as the NWSSC System Administrator and custodian of data in the CMIS/HMIS. The lead organization for NWSSC is the City of Portland, Portland Housing Bureau (PHB) in partnership with key stakeholder<sup>1</sup> organizations with PHB Intergovernmental Agreements. The NWSSC System Administrators are ServicePoint dedicated program staff from PHB, additionally each of the key stakeholder<sup>1</sup> organizations may have identified staff functioning as local ServicePoint System Administrators.

Any documentation, agreements, policies and forms created for use with NW Social Service Connections CMIS/HMIS must incorporate all NW Social Service Connections CMIS/HMIS policies, agreements, and documents and be no less restrictive.

In this agreement, "Participant" means (insert Organization name); "Client" is a consumer of services.

This agreement is between WCDHS and «OrgName» (Participant). Additional organizations may join CMIS/HMIS in accordance with the NW Social Service Connections CMIS/HMIS Policies and Procedures.

- A. Consideration: Participant agrees to pay WCDHS an annual software support charge for each year the Participant uses the CMIS/HMIS. At the time of execution of this agreement, it is estimated that Annual User Support will cost no more than \$300 per user, per year. If at any time the Annual User Support charge exceeds \$300 per user, all Participants will be notified in writing of the change. Payments are due within thirty (30) days of invoice.
1. Operating Policies: Participant agrees to follow and comply with all of the following applicable policies and procedures, each of which may be modified by NWSSC CMIS/HMIS System Administrators which are attached hereto and incorporated herein by this reference:
- Security Addendum
  - Attachment A - NW Social Service Connections CMIS/HMIS Policies and Procedures
  - Attachment B - NW Social Service Connections CMIS/HMIS Community Data Standards
  - NW Social Service Connections Data Expectations and Exceptions
  - Attachment C - NW Social Service Connections Remote Access policy

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<sup>1</sup> Contact NWSSC System Administrator for the list of key stakeholders

## Washington County, Oregon Continuum of Care Agency Participation Agreement

- Attachment D - NW Social Services Connections User Agreement
  - Attachment E - NW Social Services Connections CMIS/HMIS and HIPPA
  - Attachment F – Notice of Uses and Disclosures, Intake and Consent/Release of Information
  - CMIS/HMIS Intake Form
2. Technical Support: Bowman Systems is providing hosting services for NW Social Service Connections and Service Point. Bowman provides hosting, maintenance, monitoring, and administration for servers. The System Administrators and Bowman will provide continuing technical support as related to the ServicePoint system within budgetary constraints. Participating agencies will identify staff that will use the system and receive user licenses. If the agreement is terminated, PHB and NWSSC System Administrators will revoke user licenses, and the Participant shall promptly return any documentation to the System Administrators. Bowman Systems shall operate and maintain the network server, software, and any other network or communication devices at the host site, which is necessary for the proper functioning of the ServicePoint system. Participant shall provide and maintain its own computers and connection to the Internet.
3. Computers: Security for data maintained in NW Social Service Connections CMIS/HMIS depends on a secure computing environment. Computer security is adapted from relevant provisions of the Department of Housing and Urban Development's (HUD) "Homeless Management Information Systems (HMIS) Data Standards Manual." Agencies are encouraged to directly consult that document for complete documentation of HUD's standards relating to CMIS/HMIS.
- <https://www.hudexchange.info/resource/3826/hmis-data-standards-manual/>  
HMIS Data Standards Manual (PDF)  
Data Entry for HMIS Critical Data Standards Changes (PDF)
- PHB and Community Stakeholders may add additional standards and will provide notice(s) to Participants.
4. Training: Participant is responsible for training related to basic computer skills as well as confidentiality and ethics training. The System Administrators shall assure the provision of training of necessary Participant staff in the use of ServicePoint. The System Administrators will provide training updates, as necessary and reasonable due to staff changes and changes in technology.
5. Data: Participant shall not be denied access to Client data entered by the Participant. Participant is bound by all restrictions placed upon the data by the Client of any participant. Participant must diligently record and take all other appropriate actions to assure ServicePoint includes and reflects all restrictions or release of sharing records the Client has requested. Participant must also keep on file all Release of Information forms, including NWSSC CMIS/HMIS Client Consent/Release of Information Forms. A Client may not be denied access to their own records.

Participant shall not knowingly enter false or misleading data under any circumstances. Participant shall provide the System Administrators with the appropriate ResourcePoint Data. Violation of any of the above section by Participant is a material violation of this agreement.

If this agreement is terminated, the System Administrators shall provide to the Participant an electronic copy of their Client data. A hardcopy form will be available, upon written request, within seven (7) working days. Nonetheless, the System Administrators and remaining participants shall continue a right of use of all Client data previously entered by the terminating participant. This use is subject to restrictions requested by the Client and may be used only in furtherance of the purpose of the NWSSC CMIS/HMIS application.

**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

6. Confidentiality of Information: Participant understands that participation in the NWSSC CMIS/HMIS system will make confidential information in the Client Profile available to other participants as outlined in the NWSSC CMIS/HMIS Policies and Procedures. It is the responsibility of Participant to observe all applicable laws and regulations regarding Client confidentiality. Only Client specific data approved for release by the Client and properly recorded by the Participant shall be accessible to other participants. The Participant will provide staff training in privacy protection, for their ServicePoint users.

If a Client withdraws consent for sharing of information (release of information), Participant remains responsible to ensure that the Client's information is restricted at the Client Profile level and therefore unavailable to other participants. If Participant terminates this agreement, Participant must notify the NWSSC CMIS/HMIS and lead organization System Administrators of the withdrawal. System Administrators and remaining participants shall continue a right of use of all Client data previously entered by the terminating Participant. This use is subject to restrictions requested by the Client and may be used only in furtherance of the purpose of the NWSSC CMIS/HMIS application.

Aggregate data may be made available by CMIS/HMIS lead organizations to other entities for funding or planning purposes pertaining to providing services to the homeless. However, data released by the CMIS/HMIS lead organizations must never directly identify individual Clients.

De-identified data sets may be used for unduplicated counting, planning and research activities.

All data will be archived from ServicePoint no later than seven years after being entered or after last being modified.

7. Transferability: No right, privilege, license, duty or obligation, whether specified or not in this agreement or elsewhere, can be transferred or assigned, whether or not done voluntarily or done through merger, consolidation or in any other manner, unless WCDHS approval.
8. Mutuality: This agreement applies to, amongst and between Participant and WCDHS.
9. Limitation of Liability and Indemnification: No party to this agreement shall assume any additional liability of any kind due to its execution of this agreement or participation in the NWSSC CMIS/HMIS system. It is the intent of the parties that each party shall remain liable, to the extent provided by law, regarding its own acts and omissions; but that no party shall assume additional liability on its own behalf or liability for the acts of any other person or entity, through participation in ServicePoint. The parties specifically agree that this agreement is for the benefit of the parties only and this agreement creates no rights in any third party.

Each party shall indemnify and hold harmless all other parties, as well as the officers, directors, employees, volunteers, and agents of those parties from any actions, liabilities, demands, costs, and expenses, including court costs and attorneys fees which may arise from that party's negligent, or intentional acts or omissions under this agreement.

10. Limitation of Liability: WCDHS, PHB and Key Stakeholders<sup>1</sup> shall not be liable to Participant for any cessation, delay or interruption of services, nor for any malfunction of hardware, software or equipment to the extent that any such event is beyond reasonable control. If such an event continues for more than 30 days, Participant may terminate this agreement immediately upon written notification to WCDHS, the System

## Washington County, Oregon Continuum of Care Agency Participation Agreement

Administrators, PHB, Key Stakeholders<sup>1</sup>, and other participants. If Participant terminates thereby, the parties shall seek mutual resolution to any dispute.

11. Disclaimer of Warranties: WCDHS and the System Administrators make no warranties, expressed or implied, including the warranties or merchantability and fitness for a particular purpose, to any Participant or any other person or entity as to the services of the ServicePoint system or to any other matter.
12. Term and Termination: This Agreement shall remain in-force until revoked in writing by either party with 30 days advance written notice. This agreement will be superceded by any additional or alternative agreements presented by WCDHS, PHB and Key Stakeholders<sup>1</sup>.
13. Amendments and Waivers: This agreement cannot be altered or modified except in writing signed by the Participant and WCDHS. No waiver of any right under this agreement is effective except by a writing signed by the Participant, WCDHS. No waiver or breach shall be considered a waiver or breach of any other provision neither of this agreement nor of any subsequent breach or default. Participant shall get notice by WCDHS of any breach or waiver of a breach.
14. Notices: All notices, between Participant and WCDHS under this agreement must be in writing.
15. Scope of Agreement: This agreement, together with attachments and any referenced material, is the entire agreement between the parties and is binding upon the parties and any permitted successors or assigns.
16. Applicable Law: This agreement is governed by and subject to the laws of the State of Oregon. No legal cause of action arising from this agreement may be brought except in courts with designated jurisdiction over Washington County, OR.
17. Display of Notice: Pursuant to the notice published by the Department of Housing and Urban Development (HUD) on July 30, 2004, Participant will prominently display the Notice to Clients of Uses & Disclosures (Privacy Notice to Clients) in its program offices where intake occurs and will take appropriate steps to ensure that all Clients whose information is entered into or accessed from CMIS/HMIS, read and understand the contents of the Notice. The Notice will be substantially in the form of the **Notice to Clients of Uses & Disclosures**, except that (a) where an Organization's treatment of information is materially limited by other applicable laws or requirements, the Participant's Notice must reflect the more stringent requirements, and (b) Participant will update its Notice whenever NWSSC CMIS/HMIS updates and distributes a new form of Notice to Clients of Uses & Disclosures. Participant will provide a written copy of the Participant's Notice then in effect to any Client who requests it and will provide a copy of such Notice to all Clients who are asked to sign a Client Consent/Release of Information Form. Participant will maintain documentation of compliance with these notice requirements by, among other things, maintaining copies of all Notices it uses and the dates upon which they were first used.

**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

ASSURANCE

«OrgName» (Participant) assures that the following fully executed documents will be on file and available for review.

- The Participant's Confidentiality Policy.
- The Participant's Grievance Policy, including a procedure for external review.
- The Participant's official Privacy Notice for NWSSC clients.
- Executed Client Release of Information forms.
- Executed Participant Authorizations for Release of Information as needed.
- Certificates of Completion for required training for all NWSSC System Users.
- A fully executed User Agreement for all NWSSC System Users.
- A current copy of the NWSSC Policy and Procedures.

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Signature

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«Signatory»

Printed Name

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Date (mm/dd/yyyy)

**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

**EXTENT OF AGREEMENT**

This document represents the entire agreement between the parties and supercedes all prior representations, negotiations or agreements, whether written or oral.

Washington County, Oregon  
Department of Housing Services  
111 NE Lincoln Street, Suite 200-L  
Hillsboro, Oregon 97124

**PARTICIPANT**

«OrgName»  
«Address»  
«CityStZip»

---

Signature

---

Signature

---

Printed Name

---

«Signatory»  
Printed Name

---

Title

---

Title

---

Date (mm/dd/yyyy)

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Date (mm/dd/yyyy)

**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

**Security Addendum**

This Addendum, effective this the 1<sup>st</sup> day of July, 2011, ("Effective Date") is entered into by the Washington County Department of Housing Services (WCDHS) and «OrgName» (Business Associate).

- A. WCDHS and Business Associate are parties to a Business Associate Agreement and/or one or more Agreements containing assurances from WCDHS and Business Associate about the safeguarding of Protected Health Information (PHI) disclosed to, created by or received by Business Associate in the course of Business Associate's providing services to Business Associate Clients. As used herein "Business Associate Agreement" shall mean each of the Agreements described in the preceding sentence.
- B. The parties desire to amend each Business Associate Agreement to include assurances from Business Associate concerning electronic PHI, as required by the Security Standards (45 CFR parts 160, 162 and 164) promulgated pursuant to the Health Insurance Portability and Accountability Act.
- C. Except as expressly provided below, capitalized terms used herein shall have the meaning given them in the Business Associate Agreement.

**Now therefore, the parties agree as follows:**

- 1. **Amendment of Business Associate Agreement.** Each Business Associate Agreement shall be amended to include the following provisions:

**Compliance with Security Regulations.** Beginning no later than April 21, 2005 and continuing thereafter, with respect to any electronic PHI that Business Associate creates, receives, maintains, or transmits, Business Associate shall:

- a. Implement administrative safeguards, physical safeguards and technical safeguards that reasonable and appropriately protect the confidentiality, integrity and availability of the electronic PHI, as required by the Security Standards;
  - b. Ensure that any agent, including a subcontractor, to whom it provides such electronic PHI agrees to implement reasonable and appropriate safeguards to protect it; and
  - c. Report to WCDHS any attempt or successful unauthorized access, use, disclosure, modification, or destruction of electronic PHI, or interference with system operations in an information system, of which it becomes aware.
- 2. **No Other Amendment.** Except as expressly amended by this Addendum, all remaining terms of each Business Associate Agreement shall remain in full force and effect.

The parties have caused this Addendum to be executed by their respective, duly authorized representatives



**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

ADOPTED AND AGREED:

Washington County, Oregon  
Department of Housing Services  
111 NE Lincoln Street, Suite 200-L  
Hillsboro, Oregon 97124

**PARTICIPANT**

«OrgName»

«Address»

«CityStZip»

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Signature

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Signature

---

Printed Name

---

«Signatory»

---

Printed Name

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Title

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Title

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Date (mm/dd/yyyy)

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Date (mm/dd/yyyy)

**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

Attachment A

**NW Social Service Connections  
CMIS/HMIS Policies and Procedures**

**1. SERVICEPOINT: CMIS/HMIS SYSTEM**

Client Management Information System (CMIS)/Homeless Management Information System (HMIS) is a locally administered, electronic data collection system that stores longitudinal person-level information about persons who access the service system.

City of Portland, Portland Housing Bureau (PHB) has instituted the use of ServicePoint as the CMIS/HMIS system in response to Congressional Directive and U.S. Department of Housing and Urban Development (HUD) support for Homeless Management Information Systems (HMIS).

ServicePoint (trademarked and copyrighted by Bowman Systems) is a web based Client Information System that provides standardized assessment of a Client's needs, creates individualized service plans and records the use of housing and services which communities can use to determine the utilization of services of participating Service Providers, identify gaps in the local service continuum and develop outcome measurements.

For more information regarding Client/Homeless Management Information Systems (CMIS/HMIS) Policy and Procedures, please contact the CMIS/HMIS System Administrator.

**2. PROJECT OVERVIEW**

NW Social Service Connections (NWSSC) is the administrative entity that governs a multi Continuum of Care implementation of CMIS/HMIS used to record and share information among service-providers on services provided to homeless and near homeless Clients.

The City of Portland, Portland Housing Bureau (PHB) is the owner and operator of the NWSSC CMIS/HMIS and serves as the NWSSC System Administrator and custodian of data in the system. The lead organizations for NWSSC are: City of Portland, Portland Housing Bureau (PHB); Multnomah County, Department of County Human Services, School & Community Partnerships (SCP); Clackamas County (CC); and Washington County (WC), and any additional lead organizations in accordance with PHB Intergovernmental Agreements.

The NWSSC System Administrators are ServicePoint dedicated program staffs from PHB, additionally each of the lead organizations have identified staff functioning as ServicePoint System Administrators for their respective jurisdictions.

**3. CONTACT INFORMATION**

**Portland Housing Bureau**

421 SW 6th Avenue, Suite 500

Portland, OR 97204

<http://www.portlandonline.com/PHB/>

# Washington County, Oregon Continuum of Care Agency Participation Agreement

## System Administrator

Veronica Clevidence

503-846-4773

[veronica\\_clevidence@co.washington.or.us](mailto:veronica_clevidence@co.washington.or.us)

## 4. PURPOSE

This document is to define the general requirements and provide an overview of the CMIS/HMIS System.

## 5. SCOPE

These Policies and Procedures apply to ALL Persons or Organizations, using any portion of the CMIS/HMIS system.

## 6. GOVERNING PRINCIPLES

- 6.1. ALL Persons using CMIS/HMIS are expected to read, understand, and adhere to the HMIS Data Standards Manual (<https://www.hudexchange.info/resource/3826/hmis-data-standards-manual/>) and the Department of Housing and Urban Development Homeless Management Information Systems Data Standards (<https://www.hudexchange.info/resource/1220/final-hmis-data-standards/> )
- 6.2. ALL Persons using CMIS/HMIS are expected to read, understand, and adhere to the spirit of these principles, even when the Policies and Procedures do not provide specific direction.
- 6.3. All information entered into the CMIS/HMIS system, the Service Providers, Participants, their respective staff, and end users are bound by all applicable federal and state confidentiality regulations and laws that protect the Client records that will be placed on the HMIS system; in accordance with the Participation Agreement.
- 6.4. Clients may not be denied access to their own records. Clients have the right to see their information on ServicePoint, within the time frame specified in the Privacy Notice to Clients. If a Client requests, the Participant/User must review the information with the client.
- 6.5. Bowman Internet Systems will host our implementation of ServicePoint; all Client information in ServicePoint is encrypted.
- 6.6. Confidentiality
  - 6.6.1. The rights and privileges of clients are crucial to the success of CMIS/HMIS. These policies will ensure clients' privacy without impacting the delivery of services, which is the primary focus of agency programs participating in this project.
  - 6.6.2. Policies regarding client data are founded on the premise that a client owns his/her own personal information and provide the necessary safeguards to protect client, agency, and policy level interests.
- 6.7. Data Integrity
  - 6.7.1. Client data is the most valuable and sensitive asset of CMIS/HMIS. These policies will ensure integrity and protect this asset from accidental or intentional unauthorized modification, destruction or disclosure.
- 6.8. System Availability
  - 6.8.1. The availability of a centralized data repository is necessary to achieve the ultimate system/community wide aggregation of unduplicated statistics. The System Administrators are responsible for ensuring the broadest deployment and availability for participating service providers.
- 6.9. Compliance

## **Washington County, Oregon Continuum of Care Agency Participation Agreement**

- 6.9.1. Violation of the policies and procedures set forth in this document will have serious consequences. Any deliberate or unintentional action resulting in a breach of confidentiality or loss of data integrity may result in the withdrawal of system access for the offending entity.

### **7. DEFINITIONS**

- 7.1. Refer to Homeless Management Information System (HMIS) Data Standards- Revised Notice – March 2010 Section 1.4 Definitions for terms used throughout the notice and applicable to CMIS/HMIS.
- 7.2. Refer to CMIS/HMIS Community Data Standards Section 2. Definitions for terms commonly used throughout the Portland/Gresham/Multnomah County CoC and community but are not included in the Final Revised HMIS Data Standards; March 2010 for HUD definitions.
- 7.3. Refer to funder or program documentation for terms used by those funders or programs.

### **8. EQUIPMENT, MATERIALS AND SUPPLIES**

- 8.1. Participating Agencies are responsible for providing their own technical support for all Hardware and Software systems used to connect to CMIS/HMIS.
- 8.2. Computer Workstation (PC, Personal Computer).
  - 8.2.1. Minimum hardware and software requirements for workstations (subject to change).
    - 8.2.1.1. Computer: PC with a 2 Gigahertz or higher processor
    - 8.2.1.2. 40GB Hard Drive
    - 8.2.1.3. 512 MB RAM
    - 8.2.1.4. Microsoft Windows 2000 or XP
    - 8.2.1.5. Browser: Most recent version of Microsoft Internet Explorer or Firefox
    - 8.2.1.6. Connectivity: Minimum - 56 Kbps | | Optimal – 128 Kbps – 1.5 mps

### **9. FORMS and DOCUMENTS (incorporated by addendum and subject to change)**

- 9.1. Homeless Management Information Systems (HMIS); Data and Technical Standards - Final Notice - August 2005
- 9.2. Homeless Management Information System (HMIS) Data Standards – Revised Notice – March 2010
- 9.3. Participation Agreement
- 9.4. User Agreement
- 9.5. CMIS/HMIS Privacy Notice
- 9.6. Community Data Standards
- 9.7. Data Element Matrix
- 9.8. Schedule of aggregate report pulls
- 9.9. Release of Information Authorization Form: Shall be used for Clients whom ServicePoint information will be made available to other CMIS/HMIS participating organizations. (Not part of the addendum as this is the Organization's own document)

### **10. CONFIDENTIALITY & SECURITY**

- 10.1. CMIS/HMIS System administrators have full and complete access to all ServicePoint features and functions for their respective jurisdictions. If it is requested, the CMIS/HMIS system administrator must be willing to sign the confidentiality oaths of the Affiliated Service Providers.
- 10.2. For all information entered in the CMIS/HMIS system the Service Providers, Users and Agencies are bound by all applicable federal and state confidentiality regulations and laws that protect the Client records that will be placed on the CMIS/HMIS system.

**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

- 10.3. Any requests for release of information, including court orders and subpoenas, shall be referred to PHB. The Service Provider/User agrees not to release any confidential information received from the CMIS/HMIS database to any non affiliated service organization or individual.
- 10.4. The Service Provider shall ensure that all staff, volunteers and other persons are issued a unique User ID and password for CMIS/HMIS and receive confidentiality training on the use of CMIS/HMIS and applicable confidentiality laws.
  - 10.4.1. The Service Provider is responsible to contact the Agency or System Administrator for revoking, adding or editing User access in a timely manner.
- 10.5. Unauthorized disclosure of Protected Personal Information may be grounds for legal action.
- 10.6. Sharing of CMIS/HMIS data among Affiliated Service Providers is encouraged but not required. The CMIS/HMIS data items excluded from sharing include medical, legal, case management, case notes, and file attachments, unless specifically released by Client.
- 10.7. HIPAA Privacy Rules take precedence over CMIS/HMIS privacy standards. If an agency is a HIPAA covered agency, they must abide by HIPAA regulations.
- 10.8. Creating anonymous records may mean that reports will not provide a true unduplicated count and therefore this option should only be used if absolutely necessary. Please contact the System Administrator for other options.
- 10.9. ServicePoint™ shall only be accessed from the Organization's network, desktops, laptops, and mini-computers.
  - 10.9.1. NWSSC System Administrators are allowed to access the database from remote locations for purposes specific to their job. All staff that access the database remotely must meet the standards detailed in the System Security (above) and may only access it for activities directly related to their job. These approved remote locations include:
    - 10.9.1.1. Private Home office to provide system support as needed.
    - 10.9.1.2. Community Agency offices to support agency use of the system.
    - 10.9.1.3. Private Hotel Rooms on secure networks when providing services while in the field.
    - 10.9.1.4. Training Centers when providing services in the field.
- 10.10. Remote Access (In special circumstances access from remote locations may be permitted after application and approval by Agency and System Administrators)
  - 10.10.1. The ServicePoint Remote Access Agreement must be completed and submitted for approval.
  - 10.10.2. The Agency Administrator must review the need for remote access and investigate other options.
  - 10.10.3. If no other valid options are available the Agency Administrator must approve in writing remote access for a user.
  - 10.10.4. Once remote access agreement has been approved and signed by the Agency Administrator a copy will be filed with the System Administrators for final approval.
  - 10.10.5. Remote Access is subject to change at the NWSSC System Administrator's discretion.
  - 10.10.6. Agency and System Administrators will periodically audit all remote access.
- 10.11. Public Key Infrastructure (PKI)
  - 10.11.1. When a computer is used for ServicePoint, the Service Provider is responsible to contact the System Administrator for the PKI Certificate, password and installation instructions.
  - 10.11.2. When a computer is no longer used for Service Point, the service provider needs to remove the PKI Security Certificate .

## **11. ROLES AND RESPONSIBILITIES**

- 11.1. If it is requested of the CMIS/HMIS system administrators he must be willing to sign the confidentiality oaths of the Affiliated Service Providers.

**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

**11.2. PHB and the NWSSC System Administrator**

- 11.2.1. Liaison With HUD
- 11.2.2. Project Staffing
- 11.2.3. Overall Responsibility For Success Of NWSSC CMIS/HMIS
- 11.2.4. Creation Of NWSSC Project Forms And Documentation
- 11.2.5. NWSSC Project Policies And Procedures And Compliance
- 11.2.6. Keeper Of Signed Memorandums Of Understanding and Intergovernmental Agreements
- 11.2.7. Procurement/Renewal of Server Software And Licenses

**11.3. ALL Lead Organizations**

- 11.3.1. Liaison with NWSSC System Administrator
- 11.3.2. Project Staffing
- 11.3.3. Creation of Local project Forms and Documentation
- 11.3.4. Data quality reviews
  - 11.3.4.1. Data Quality
  - 11.3.4.2. Data Validity
  - 11.3.4.3. Data Completeness
- 11.3.5. Adherence To HUD Data Standards
- 11.3.6. Adherence to Community Data Standards
- 11.3.7. Adherence to Project Data Standards
- 11.3.8. User Administration
  - 11.3.8.1. Manage User Licenses
  - 11.3.8.2. Process User Agreement forms
- 11.3.9. Training
  - 11.3.9.1. Curriculum Development
  - 11.3.9.2. Training Documentation
  - 11.3.9.3. Confidentiality Training
  - 11.3.9.4. Application Training For Agency Administrators and End Users
  - 11.3.9.5. New Provider training
  - 11.3.9.6. Upgrade, enhancement, refresher or other training
- 11.3.10. Outreach/End User Support/Technical Assistance/Password Resets
  - 11.3.10.1. Password Resets require some sort of user Identity verification.
- 11.3.11. Coordinate any application customizations with the NWSSC System Administrator
- 11.3.12. Will use universal naming conventions, in order to better standardize, when creating new assessment questions, sub-assessments, and any other system wide modifications.
- 11.3.13. All Local documentation including P&Ps and agreements must be no less restrictive than NWSSC documents.

**11.4. Contributory HMIS Organization (CHO) Responsibilities:**

- 11.4.1. The CHO must make available to users a secure system to access ServicePoint, including but not limited to firewall and virus protection.
- 11.4.2. The CHO must be current all related contracts.
- 11.4.3. The CHO shall follow, comply with and enforce the Agency Agreement.
- 11.4.4. The CHO shall abide by all data standards and all policies and procedures.
- 11.4.5. The CHO shall keep abreast of all ServicePoint updates and policy changes.
- 11.4.6. The CHO shall identify and approve their respective Agency Users.
- 11.4.7. The CHO shall designate one User to be the Agency's Key User/Agency Administrator.

**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

- 11.4.8. The CHO shall be responsible for entering Client data (profile, household, needs, services, referrals, any other Client data you may require), following up on referrals, and running reports in a timely manner.
- 11.4.9. The CHO shall have representation at agency administrators/regional data quality review meetings.
- 11.4.10. The CHO shall collect data on all clients as called out in the Data Element Matrix
- 11.4.11. CHO Exceptions may include non-homeless CMIS organizations, and DV Comparable database organizations. Please contact the System Administrator for information and waiver.

**11.5. User Responsibilities:**

- 11.5.1. The User shall provide an email contact to the System Administrators for communication purposes.
- 11.5.2. The User shall follow, comply with and enforce the User Agreement.
- 11.5.3. The User shall comply with all data standards and policies and procedures.
- 11.5.4. Each User is provided with an access level as required by his/her role. This access level controls who can see which information, lower levels of access allow ONLY viewing of basic demographics, while the middle levels of access allow additional information to be viewed. The highest levels of access are limited to administrators. Confidentiality is a primary concern and these levels of access help control access to information.
- 11.5.5. Every User of the CMIS/HMIS system is authenticated with a unique User ID and password. This provides a level of security and accountability for the CHO's database. Sharing of User IDs or passwords is forbidden.
- 11.5.6. The User shall only enter individuals in the CMIS/HMIS database that exist as Clients under the Service Provider's approved area of service. The User shall not misrepresent its Client base in the CMIS/HMIS database by entering known, inaccurate information. The User shall not knowingly enter false or misleading data under any circumstances.
- 11.5.7. The User shall consistently enter information into the CMIS/HMIS database and will strive for Real Time data entry, and be obligated to weekly data entry.
- 11.5.8. The User will not alter information, with known inaccurate information, in the CMIS/HMIS database that has been entered by another Service Provider (i.e. Service Provider will not purposefully enter inaccurate information to over-ride information entered by another Service Provider).
- 11.5.9. The User shall utilize the CMIS/HMIS database for business purposes only.
- 11.5.10. The User shall not use the CMIS/HMIS database with intent to defraud federal, state or local governments, individuals or entities, or to conduct any illegal activity.
- 11.5.11. The User shall not cause in any manner, or way, corruption of the CMIS/HMIS database in any manner.
- 11.5.12. In the event that data entry cannot be made Real Time and the User utilizes hard copy paper forms, once the data has been entered into CMIS/HMIS, the forms shall be securely stored or suitably disposed of.
- 11.5.13. The User shall enter data into CMIS/HMIS
  - 11.5.13.1. Universal Data elements shall be entered on all Clients.
    - 11.5.13.1.1. In addition to the Universal Data elements all HUD Funded CHO Users, at a minimum, shall also enter the additional data elements required by the Data Standards for all Clients.
    - 11.5.13.1.2. In addition to the Universal Data elements all City of Portland Funded CHO Users, at a minimum, shall also enter data on all clients as called out in the Data Element Matrix.

## **Washington County, Oregon Continuum of Care Agency Participation Agreement**

- 11.5.13.1.3. In addition to the Universal Data elements all Continuum of Care OR-501 housing provider Users, at a minimum, shall also enter data on all clients as called out in the Data Element Matrix.
- 11.5.13.1.4. In addition to the Universal Data elements all Non-HUD funded CHO Users, at a minimum, shall also enter funder or program specific data elements as required.
- 11.5.14. Sharing data is optional but entering data is not optional. An ROI shall be completed by all clients, even if not sharing data.
- 11.5.15. The User is responsible for data entry accuracy and correctness.
- 11.5.16. The User shall log off the CMIS/HMIS and shut down the browser when not using CMIS/HMIS.
- 11.5.17. The User shall utilize the password protected screen savers that automatically turn on to mitigate the burden of shutting down the workstation when momentarily stepping away from the work area.
- 11.5.18. Report any discrepancies in the use of the PHB CMIS/HMIS system, including without limitation access of information and entry of information, to the Service Provider Key User or to the System Administrator.
- 11.5.19. The User shall periodically, when instructed by the Agency or System Administrator, run and review audit reports, making corrections to ensure data accuracy and completeness.

### **11.6. Key User/Agency Administrator Responsibilities:**

- 11.6.1. The Key User/Agency Administrator shall observe all User Responsibilities.
- 11.6.2. The Key User/Agency Administrator shall use Agency NewsFlash only for distribution of CMIS/HMIS information.
- 11.6.3. The Key User/Agency Administrator shall act as the first level of Service Provider administration and support in the CMIS/HMIS system.
- 11.6.4. The Key User/Agency Administrator shall be responsible for the initial training of new Users in his/her Agency.
- 11.6.5. The Key User/Agency Administrator shall regularly run and review audit reports to ensure policies are being followed by staff.
- 11.6.6. The Key User/Agency Administrator will be responsible for monitoring all User access within their own Agency.

### **11.7. System Administrators Group**

- 11.7.1. Is made up of at least 1 representative from each of the lead organizations of the NWSSC CMIS/HMIS and other participant representatives or advocates as invited by the NWSSC Administrators.
- 11.7.2. Review and make recommendations on all NWSSC HMIS documents, attachments, and related forms
- 11.7.3. Identify and prioritize system enhancements
- 11.7.4. Determine the guiding principles that should underlie the HMIS implementation activities of the project and participating organization and service programs
- 11.7.5. Setting minimum data collection requirements
- 11.7.6. Encourage continuum-wide provider participation
- 11.7.7. Facilitate consumer involvement
- 11.7.8. Recommend criteria, standards, and parameters for the usage and release of all data collected as part of the HMIS
- 11.7.9. Recommend continuum-level mechanisms for monitoring and enforcing compliance with the approved policies and procedures
- 11.7.10. Enhance the implementation and operations of the system for service-providers so they can protect the interests and privacy of their clients



**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

- 11.7.11. Enhance and improve the quality of data being reported to various levels throughout the Continuum
- 11.7.12. Create and implement procedures for additional system issues for Participating Agencies.

**11.8. ServicePoint Agency Administrator Group**

- 11.8.1. Agency Administrator Group will be established for the purpose of addressing implementation and ongoing operational issues.
- 11.8.2. Identify and prioritizing system enhancements
- 11.8.3. Providing feedback on system performance
- 11.8.4. Brainstorming the best uses of the HMIS
- 11.8.5. Regularly reviewing compliance with all NWSSC HMIS policies, agreements, and other requirements
- 11.8.6. Reviewing data quality and providing feedback to improve data quality

**12. DATA STANDARDS**

- 12.1. Homeless Management Information System (HMIS) Data Standards – Revised Notice – March 2010
- 12.2. Homeless Management Information Systems (HMIS); Data and Technical Standards - Final Notice - August 2005
- 12.3. Community Data Standards (may be revised at the discretion of the NWSSC System Administrator)
- 12.4. Data Element Matrix (may be revised at the discretion of the NWSSC System Administrator)

**13. DATA EXPECTATIONS**

- 13.1. Data will be entered within 5 business days of client contact
- 13.2. Data will be entered in a timely manner to meet aggregate reporting needs
- 13.3. Data accuracy will be no less than 95% (The file matches data entry)
- 13.4. Universal Data Elements Null/Missing Values will not exceed 5%
- 13.5. Universal Data Elements Refused/Don't Know Values will not exceed 5%
  - 13.5.1. Refused/Don't Know responses are client identified, not the case manager or data entry person's assessment.
- 13.6. No outstanding Corrective Actions from last NWSSC CMIS/HMIS Monitoring

**14. REPORTS/DATA SUBMISSIONS**

- 14.1. System or Community Wide reporting is done on a regular basis without notification. Refer to the Schedule of aggregate reports pulls document for timelines.
  - 14.1.1. Electronic Data Transfers may occur, with appropriate agreements in place.
    - 14.1.1.1. State MDR/OPUS
    - 14.1.1.2. County/ TOURS
    - 14.1.1.3. Others as needed, with appropriate agreements in place.
- 14.2. NWSSC CMIS/HMIS Standard reports include, but are not limited to
  - 14.2.1. SHAR
  - 14.2.2. ACDC
  - 14.2.3. Entry/Exit or APR
- 14.3. The Service Provider/User's access to data about Clients it does not serve shall be limited based on the current status of any release of information on file.
- 14.4. The general public can request non-identifying aggregate and statistical data, by submitting a data request.

**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

- 14.5. Non identifying aggregate and statistical data will not contain outliers. Outliers may be removed if they represent less than 5% of any value.
- 14.6. At a minimum, Password secure any document that includes client name or other PPI. Do not email the password with the file.
- 14.7. The CMIS/HMIS System Administrator will address all requests for system or community wide data from entities other than Affiliated Service Providers or clients.
- 14.8. The System Administrator will run system-wide reports to assess the data, quality and level of participation by Affiliated Service Providers. Results of these reports may be shared with Affiliated Service Providers.
- 14.9. The System Administrator may run reports for research use. Information in NWSSC CMIS/HMIS may be used to conduct research related to homelessness and housing programs, service needs, income supports, education and employment, and program effectiveness. Client names and social security numbers will never appear on a research report.

**15.PRIVACY REQUIREMENTS**

- 15.1. The CHO must post a sign at each intake desk (or comparable location) that explains generally the reasons for collecting this information.
- 15.2. The CHO must publish a privacy notice describing its policies and practices for the processing of PPI and must provide a copy of its privacy notice to any individual upon request.
- 15.3. The CHO must specify in its privacy notice the purposes for which it collects PPI and must describe all uses and disclosures.
- 15.4. If the CHO maintains a public web page, the CHO must post the current version of its privacy notice on the web page.
- 15.5. The CHO must post a sign stating the availability of its privacy notice to any individual who requests a copy.
- 15.6. The CHO must maintain permanent documentation of all privacy notice amendments.
- 15.7. The CHO must allow an individual to inspect and to have a copy of any PPI about the individual.
- 15.8. The CHO must offer to explain any information that the individual does not understand.
- 15.9. The CHO must consider any request by an individual for correction of inaccurate or incomplete PPI pertaining to the individual, The CHO is not required to remove such information but they may mark such information as inaccurate or incomplete or supplement such information.
- 15.10. The CHO must require each member of its staff (including employees, volunteers, affiliates, contractors and associates) to sign (annually or otherwise) a confidentiality agreement that acknowledges receipt of a copy of the privacy notice and that pledges to comply with the privacy notice.
- 15.11. The CHO must require each member of its staff (including employees, volunteers, affiliates, contractors and associates) to undergo (annually or otherwise) formal training in privacy requirements.
- 15.12. The CHO must establish a method, such as an internal audit, for regularly reviewing compliance with its privacy notice.
- 15.13. The CHO must establish an internal or external appeal process for hearing an appeal of a privacy complaint or an appeal of denial of access or correction rights.
- 15.14. The CHO must protect CMIS/HMIS system from malicious intrusion behind a secure firewall.
- 15.15. The CHO must secure any paper or other hard copy containing PPI that is either generated by or for CMIS/HMIS, including, but not limited to report, data entry forms and signed consent forms.

**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

Attachment B

**NW Social Service Connections  
CMIS/HMIS Community Data Standards**

**16. Introduction to the NWSSC Community Data Standards Notice**

As called out in the Final Revised HMIS Data Standards; March 2010 (<http://www.hmis.info/ClassicAsp/documents/Final%20HMIS%20Data%20Standards-Revised%203.pdf>); HUD Program Descriptor Data Elements, Universal Data Elements, Program-Specific Data Elements, and Homelessness Prevention and Re-Housing Program Data Elements; are collected and entered as appropriate. Based on the special reporting needs of NWSSC, the Continuum of Care (OR-501), the City of Portland, other program specific needs, as well as best practices we are implementing these data standards at a local level. The intention is to allow for the collection and reporting of standardized client and program-level data on homeless service usage among programs within our community.

The NWSSC CMIS/HMIS is the principal source of data for Continuum of Care (OR-501) reporting including, but not limited to, Home Again: a 10-year plan to end homelessness in Portland and Multnomah County.

**17. Definitions**

This section defines terms commonly used throughout the community but are not included in the Final Revised HMIS Data Standards; March 2010 for HUD definitions. This list is not all-inclusive and is subject to change.

- **ACDC** - Active Client Demographic Count (considered a CoC Standard Report)
- **Adult** –An adult is any person 18 years of age or older.
- **Anonymous Client** - A client entered into the CMIS/HMIS with a unique computer generated identifying code used in lieu of actual client name. Contact PHB for more information.
- **B2H** – Bridges to Housing
- **BEST** - Benefits Eligibility Specialists Team
- **Children** – Children are defined as any person under the age of 18.
- **~Chronically Homeless-** HUD has broadened the definition of Chronic to be: either individual or family, in that the individual or family--
  - (i) is homeless and lives or resides in a place not meant for human habitation, a safe haven, or in an emergency shelter;
  - (ii) has been homeless and living or residing in a place not meant for human habitation, a safe haven, or in an emergency shelter continuously for at least 1 year or on at least 4 separate occasions in the last 3 years; and
  - (iii) has an adult head of household (or a minor head of household if no adult is present in the household) with a diagnosable substance use disorder, serious mental illness, developmental disability (as defined in section 102 of the Developmental Disabilities Assistance and Bill of Rights Act of 2000 (42 U.S.C. 15002)), post traumatic stress disorder, cognitive impairments resulting from a brain injury, or chronic physical illness or disability, including the co-occurrence of 2 or more of those conditions.
- **CMIS** - Client Management Information System
- **Completeness** – Is the client record complete?

## Washington County, Oregon Continuum of Care Agency Participation Agreement

In general, an object is complete if nothing needs to be added to it.

- **Data Element Matrix** – Summary of all Data elements, Subject, Comments/Notes, Values, When Collected, and Program Expectation
- **Data quality** – Accuracy: Does the File match data entry?  
Data is of high quality "if they are fit for their intended uses in operations, decision making and planning" (J. M. Juran). Alternatively, the data is deemed of high quality if it correctly represents the real-world construct to which it refers.
- **Domestic violence** - can be defined as a pattern of abusive behavior in any relationship that is used by one partner to gain or maintain power and control over another intimate partner. Domestic violence can be physical, sexual, emotional, economic, or psychological actions or threats of actions that influence another person. This includes any behaviors that intimidate, manipulate, humiliate, isolate, frighten, terrorize, coerce, threaten, blame, hurt, injure, or wound someone. (Refer to Violence Against Women Act (VAWA) and Department of Justice for more information <http://www.ovw.usdoj.gov/ovw-fs.htm>)
- **Entry** – ServicePoint procedure used to represent the assistance start date, enrollment in program or point in time that the client becomes reportable
- **Entry Exit Report/ HUD-40118 APR** – Performance report/HUD Annual Performance Report (considered a CoC Standard Report)
- **eSNAPS** - Grants management system for HUD's Homeless Programs
- **Exit** - ServicePoint procedure used to represent the assistance end date, program departure or point in time that the client is no longer reportable
- **HAP** - Housing Authority of Portland
- **HDX** – Homeless Data Exchange
- **HIC** – Housing Inventory Account
- **High resource Using Family** (AKA: Chronically Homeless Family) *developed for Portland/Gresham/Multnomah County's 10-Year Plan to End Homelessness* - must meet the following: Family as defined as a parent(s) or guardian with one or more children; who have High resource usage is based on any family member's involvement with multiple categories listed below within a 12-month period unless otherwise specified.
  - Substance Abuse
  - Mental Health
  - Foster Care (State or Tribal)
  - Corrections
  - Physical and Cognitive Health Issues
  - Domestic Violence/Victim's Services/Issues
  - Homeless/Housing System
  - Mainstream Resources Involvement

## Washington County, Oregon Continuum of Care Agency Participation Agreement

- **Homeless** - Federal Definition of Homeless - The United States Code contains the official federal definition of homeless. In Title 42, Chapter 119, Subchapter I, homeless is defined as:  
§11302. General definition of homeless individual  
(a) In general  
For purposes of this chapter, the term "homeless" or "homeless individual or homeless person" includes-
  1. an individual who lacks a fixed, regular, and adequate nighttime residence; and
  2. an individual who has a primary nighttime residence that is -
    1. a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill);
    2. an institution that provides a temporary residence for individuals intended to be institutionalized; or
    3. a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.  
(b) Income eligibility
  1. In general, A homeless individual shall be eligible for assistance under any program provided by this chapter, only if the individual complies with the income eligibility requirements otherwise applicable to such program.
  2. Exception, Notwithstanding paragraph (1), a homeless individual shall be eligible for assistance under title I of the Workforce Investment Act of 1998 [29 U.S.C. 2801 et seq.].  
(c) Exclusion, For purposes of this chapter, the term "homeless" or "homeless individual" does not include any individual imprisoned or otherwise detained pursuant to an Act of the Congress or a State law.
- **Household** – A single individual or a group of persons who together apply for, enroll in, or receive services.
- **Households with Children and Adults** - include households composed of at least two persons, one of whom is an adult and one is a child.
- **Households with only children** - are composed only of persons age 17 or under, including unaccompanied youth, adolescent parents and their children, adolescent siblings, or other household configurations composed only of children.
- **Household without Children** – A household that does not include any children, including unaccompanied adults, multiple adult households, and pregnant women not accompanied by other children. For the purposes of reporting, households without children that contain multiple persons should be counted as one (1) household without children.
- **KNAC** – Key Not A Card
- **Leaver** – refers to clients who exited and were not in the program on the last day of the reporting period.
- **MFI** - Median Family Income
- **NWSSC**- Northwest Social Services Connection
- **OTIS** - Outside Transitions into Stability
- **PHB** – Portland Housing Bureau
- **Privacy Notice** - Notice to Clients of Uses & Disclosures
- **Provider /Provider Programs** – Organization or Agency and the assistance programs they operate
- **PSDE** – Program Specific Data Element
- **PSH** - Permanent Supportive Housing

## Washington County, Oregon Continuum of Care Agency Participation Agreement

- **Regulatory compliance** – Do the provider and its users comply to Data Standards and Policies and Procedures?  
Regulatory compliance describes the goal agencies aspire to in their efforts to ensure that personnel are aware of and take steps to comply with relevant laws and regulations.
- **ROI** – Release of Information – includes both ROI paper form and electronic transaction for ROI (electronic release only).
- **S+C** - Shelter Plus Care
- **SEA** – City of Portland Service Efforts and Accomplishments
- **ServicePoint** – is the City of Portland, NWSSC Connections, software of choice for HMIS/CMIS. ServicePoint is a product of Bowman Systems, Shreveport LA. ServicePoint is a web-based management information system that allows agencies, coalitions, and communities to manage (real-time) client and resource data. ServicePoint provides client, service and referral tracking, case management, agency and program indexing, and reporting.
  - **ClientPoint** – A module in ServicePoint that allows Users to enter, edit, view, or print Client information. Additionally, ClientPoint offers features such as building and tracking family relationships, restricting Client records, and conducting case management.
  - **ServicePoint** – A module that allows you to add new service items, update status, send and receive referrals, and view a Client's service history (unless restricted). The result is a thorough understanding of a Client's situation and providing Clients quicker access to appropriate services.
  - **ShelterPoint** – A module specifically designed to provide housing providers an efficient method of managing inventory, viewing area availability, and making referrals.
  - **ART** – The reporting module for ServicePoint.
- **SHAR** - Shared Housing Assessment Report (considered a CoC Standard Report)
- **Stayer** –refers to clients who were in the program on the last day of the reporting period. This includes clients who exited the program and re-entered the program before the end of the reporting period.
- **STRA** – Short Term Rent Assistance Program; administrated by HAP
- **Transitional Housing** –
  - (The McKinney-Vento Homeless Assistance Act As amended by S. 896 The Homeless Emergency Assistance and Rapid Transition to Housing (HEARTH) Act of 2009) The term 'transitional housing' means housing the purpose of which is to facilitate the movement of individuals and families experiencing homelessness to permanent housing within 24 months or such longer period as the Secretary determines necessary.
  - Transitional housing means a project that has as its purpose facilitating the movement of homeless individuals and families to permanent housing within a reasonable amount of time (usually 24 months). Transitional housing includes housing primarily designed to serve deinstitutionalized homeless individuals and other homeless individuals with mental or physical disabilities and homeless families with children.
- **UDE** – Universal Data Element
- **Victim Service Provider** - A nonprofit or nongovernmental organization including rape crisis centers, battered women's shelters, domestic violence transitional housing programs, and other programs whose primary mission is to provide services to victims of domestic violence, dating violence, sexual assault, or stalking. Programs that do not identify any of these populations as their primary mission are not considered victim service providers under VAWA and are not exempt from using HMIS.
- **WESC** - Women's Emergency Service Collaborative

## **Washington County, Oregon Continuum of Care Agency Participation Agreement**

### **18.Documentation**

- Homeless Status
  - Participants and respective users will record information on the homeless status of all clients entered into ServicePoint.
    - Data must be updated in ServicePoint at each program entry or as soon as possible thereafter and at program exit.
- If a funding program requires that a data element(s) must be collected, then official documentation must be obtained. If the funding source chooses to have these data elements as “optional”, then no official documentation is required (it can be client reported, etc.)
  - SHP funded programs, S+C, SRO – because HUD requires the collection of program-specific data elements (example: 4.3 Physical Disability; 4.4 Developmental Disability; 4.5 Chronic Health Condition; and 4.7 Mental Health) for the purposes of the APR, if the response is “yes”, then the programs are required to obtain official written documentation to back it up.
  - Emergency Shelters – currently no federal funding source requires the collection of program-specific data elements for emergency shelters (only the PSDEs and UDEs are required). Therefore if an emergency shelter chooses to collect any of these data elements, it does NOT require official documentation and it can be client reported, etc.

### **19.NWSSC CMIS/HMIS Goals**

OR-501 Portland/Multnomah County/Gresham CMIS/HMIS Goals include:

- Set common objectives
- Identify indicators/issues for performance measurement and evaluation
- Identify questions suitable for inclusion in community plan evaluations
- Coordinated approach in order to ensure that there is sufficient, consistent and timely information

### **20.Data Entry requirements**

- It is the responsibility of Participants and respective users to ask for all Universal and other required data elements from each client entered into ServicePoint.
  - Exceptions may include non-homeless CMIS organizations. Please contact the System Administrator for information and waiver.
- Data will be entered in a timely manner, within 5 working days following client contact.
- Blanks, Nulls or “unknown” entries in required fields will not exceed 5% per month.
- Complete and accurate data is essential to the system’s success; however it is important to note exceptions.
  - Clients may refuse to provide information without being denied services.
  - In the case where there is a conflict with collecting data and the provision of quality services and/or client safety, providers should not enter personal identifying information or do so at a later time.
  - NWSSC CMIS/HMIS monitoring will include data quality, “Does the file match data entry?” Accuracy will be no less than 95%.
- Although each participant will use ServicePoint in various capacities, the minimum data fields required for all providers regardless of funding source are detailed in the Data Element Matrix.

## **Washington County, Oregon Continuum of Care Agency Participation Agreement**

### **21.Shared Outcomes**

- Participants will complete all data entry requirements as needed for common goals and objectives reporting
  - Multnomah County/City of Portland/Continuum of Care OR-501 service providers share common goals related to placement and housing retention
    - Placement
    - Housing Outcomes (retention status) at 6 and 12 months, unless otherwise indicated by contract.
    - Other information, as needed, subject to change

### **22.Client Consent**

- The Notice to Clients of Uses & Disclosures must be posted and/or given to each client so that he/she is aware of the potential use of his/her information and where it is stored. No consent is required for the functions articulated in the notice.
- Consent of the individual for data collection is inferred for the circumstances of the collection.
  - “We collect personal information directly from you (the client) for reasons that are discussed in our privacy statement. We may be required to collect some personal information by law or by organizations that give us money to operate this program. Other personal information that we collect is important to run our programs, to improve services for homeless persons, and to better understand the needs of homeless persons. We only collect information that we consider to be appropriate.”
- A client has a right to request entrance into the database as an anonymous client or a restricted client. Contact PHB for more information.
- A completed Release of Information Form is required prior to any electronic information sharing. The ServicePoint ROI procedure must be transacted to effectively share electronic information appropriately.
  - Clients who choose not to authorize sharing of information cannot be denied services for which they would otherwise be eligible.
  - All Client Authorization for ROI forms related to the CMIS/HMIS data sharing will be placed in a file to be located on premises.
  - CMIS/HMIS-related Authorization for ROI forms will be retained for a period of 7 years, after which time the forms will be discarded in a manner that ensures client confidentiality is not compromised.



**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

**NW Social Service Connections  
Data Expectations and Exceptions**

ALL Persons using CMIS/HMIS are expected to read, understand, and adhere to

- The Final Revised HMIS Data Standards; March 2010,
- The Department of Housing and Urban Development Homeless Management Information Systems (HMIS); Data and Technical Standards Final Notice; Notice
- All NW Social Service Connections documentation; including but not limited to the CMIS/HMIS Policies and Procedures and the CMIS/HMIS Community Data Standards

It is the responsibility of Participants and respective users to ask for all Universal and other required data elements from each client and enter into ServicePoint in a timely manner.

We recognize that it may be difficult to obtain all UDEs for all clients entered into the CMIS/HMIS. Exceptions may include non-homeless CMIS organizations. Please contact the System Administrator for information and waiver.

<b>Program Type</b>	<b>Timely Data Entry (days)</b>	<b>Don't Know or Refused</b>	<b>Missing Data</b>
	Not to Exceed		
Emergency Shelter	3	10%	10%
Transitional Housing	5	5%	5%
Permanent Supportive Housing	5	5%	5%
Homeless Outreach	3	10%	10%
Homelessness Prevention and Rapid Re-Housing	5	5%	5%
Services Only	5	10%	10%
Other: Non-Homeless/Non CoC CMIS organizations (i.e. SUN Service System) <sup>1</sup>	N/A	10%	10%
Other: Homeless special programs (i.e. Point in Time Counts) <sup>1</sup>	N/A	10%	10%
Other: TBD	N/A	TBD	TBD
Safe Haven	3	10%	10%
Permanent Housing (i.e. Mod Rehab SRO, Subsidized housing without services)	5	5%	5%
Overall System wide	5	5%	5%

<sup>1</sup> - Data Completeness measured against data elements required by program, NOT against the HUD Universal Data Elements.

**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

Attachment C

**NW Social Service Connections  
REMOTE ACCESS POLICY**

ServicePoint™ is intended only be accessed on-site from the Organization's network, desktops, laptops, mini-computers and any other electronic devices that are web capable .

In special circumstances access from remote locations may be permitted after application and approval by both the Agency and System Administrators.

The Remote Access Policy and Agreement is an extension of the User Agreement and NWSSC CMIS/HMIS Policies and Procedures. The USER shall comply with all Policies, Procedures, Agreements and all rules associate with NWSSC CMIS/HMIS.

The Agency Administrator has the responsibility to assure the user is in compliance with this and all other Policies, Procedures, Agreements and rules associated with NWSSC CMIS/HMIS. The Agency Administrator will regularly, at least annually, audit remote access by associating dates and times to the user's time sheet.

All staff that accesses the database remotely must meet the standards detailed in the System Security (see Policy and Procedures) and may only access it for activities directly related to their job.

**Examples of Remote Access:**

- Community Agency offices on secure networks to support agency use of the system.
- Training Centers on secure networks when providing services or training in the field.
- Private Agency Onsite Residence Offices on secure networks to complete assigned work duties.
- Agency Administrators or System Administrators only: Private Home office on secure networks to provide system support as needed.

**Requirements for Remote Access of NWSSC CMIS/HMIS include:**

- System security provisions will apply to all systems where NWSSC CMIS/HMIS is accessed.
- User must certify compliance all NWSSC CMIS/HMIS Policies, Procedures and Agreements.
- User must follow all confidentiality and privacy rules.
- User must assure access only access for activities directly related to their job.
- Remote access will only be on secure networks. (You will not access NWSSC CMIS/HMIS on any non-protected, free, or other network or Wi-Fi).
- Data containing client identifiable information will not be downloaded to any remote access site at any time for any reason.
- Data downloaded for purposes of statistical analysis will exclude client identifiable information.
- All CMIS/HMIS data (electronic and hardcopy), will be securely stored and/or disposed of in such a manner to protect the information.

Application for remote access must be made by completing NWSSC CMIS/HMIS Remote Access Agreement and submitting completed form to the Agency Administrator.

**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

Upon receipt that Agency Administrator will review and confirm the need for applicant to have remote access. The signed agreement will then be forwarded to the System Administrator for final approval.

The System Administrator will sign and retain the NWSSC CMIS/HMIS Remote Access Agreement, thus authorizing remote access for the identified user. The System Administrator will advise both the Agency Administrator and the User that approval has been granted.

Violation of this or any NWSSC CMIS/HMIS policy or agreement may result in the termination of the User License or Agency Participation.

**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

Attachment D

**NW Social Service Connections  
USER AGREEMENT**

**User name:** \_\_\_\_\_ **Organization:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Statement of Confidentiality**

Employees, volunteers, and any other persons with access to NW Social Service Connections CMIS/HMIS are subject to certain guidelines regarding use of ServicePoint™. ServicePoint™ contains personal and private information on individuals and all such information must be treated carefully and professionally by all who access it.

Guidelines for use of ServicePoint include:

- The User shall comply with all data standards and policies and procedures.
- ServicePoint™ User Identification and Passwords must be kept secure and are not to be shared.
- Information obtained from ServicePoint™ is to remain confidential, even if my relationship with \_\_\_\_\_ changes or concludes for any reason.
- The CHO must post a privacy notice describing its policies and practices for the processing of PPI. The User must offer to explain any information that the individual does not understand, and must provide a copy of its privacy notice to any individual upon request.
- Informed client or guardian consent, as documented by a Release of Information form, is required for any data sharing, or disclosure of identifying information and service transactions via ServicePoint™.
- If a client or guardian chooses not to sign Release of Information form, all client information must be closed with no exceptions
- Only general, non-confidential information is to be entered in the “other notes/comments” section of the Client Profile on ServicePoint™. Confidential information, including TB diagnosis, HIV diagnosis or treatment information, domestic violence and mental and/or physical health information, is not permitted to be entered in this section.
- Client records only pertaining to user’s assigned work duties will be accessed.
- Only individuals that exist as clients under the Organization’s jurisdiction may be entered into ServicePoint™.
- Misrepresentation of the client base by entering known, inaccurate information is prohibited.
- Client records are not to be deleted from ServicePoint™, contact NWSSC CMIS/HMIS System Administrators for appropriate action.
- Discriminatory comments based on race, color, religion, national origin, ancestry, handicap, age, sex, and sexual orientation are not permitted in ServicePoint™. Profanity and offensive language are not permitted in ServicePoint™.
- ServicePoint™ is to be used for business purposes only.
- Transmission of material in violation of any United States Federal or State of Oregon regulations or laws is prohibited and includes material that is copyrighted, legally judged to be threatening or obscene, and considered protected by trade secret. ServicePoint™ will not be used to defraud the

**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

- Federal, State, or local government or an individual entity or to conduct any illegal activity.
- Any unauthorized use, access or unauthorized modification to ServicePoint™ computer system information or interference with normal system operations will result in immediate suspension of your access to ServicePoint™ and may jeopardize your ServicePoint access and/or your employment status.
  - ServicePoint™ shall only be accessed from the Organization's network, desktops, laptops, mini-computers and any other electronic devices that are web capable. In special circumstances access from remote locations may be permitted after application and approval by both the Agency and System Administrators.
  - The User is expected to physically enter the password each time he or she logs on to the system. DO NOT Save passwords in auto-complete settings.
  - Should the User download client identifiable information in any format, he or she will securely store and/or dispose of all electronic and hardcopy in a manner to protect the client's personal information. At a minimum this will require the use of strong password protection, preferably including encryption.
  - This agreement will be superceded by any additional or alternative agreements presented by NWSSC CMIS/ HMIS System Administrators.

Failure to comply with the provisions of this Statement of Confidentiality may result in the termination of the User License or Agency Participation. Your signature below indicates your agreement to comply with this statement of confidentiality. There is no expiration date of this agreement, and may be renewed when System Administrators see the need.

_____ Signature	_____ Printed Name and Title	_____ Date
_____ Witness Signature	_____ Witness Printed Name and Title	_____ Date

The User Agreement/Statement of Confidentiality should be kept on file at the Organization or returned to the appropriate lead organization when requested. Forms for individuals no longer employed by the Participant should be kept on file for seven years following date of termination. System Administrators may, at any time, monitor compliance.

**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

Attachment E

**NW Social Service Connections  
CMIS/HMIS and HIPAA**

NW Social Service Connections CMIS/HMIS is not a HIPAA covered entity and therefore not subject to the rules and regulations of HIPAA. HIPAA covered entities may participate in NW Social Service Connections CMIS/HMIS.

**HIPAA is the: Health Insurance Portability and Accountability Act of 1996**

A Federal law that allows persons to qualify immediately for comparable health insurance coverage when they change their employment relationships. Title II, Subtitle F, of HIPAA gives HHS the authority to mandate the use of standards for the electronic exchange of health care data; to specify what medical and administrative code sets should be used within those standards; to require the use of national identification systems for health care patients, providers, payers (or plans), and employers (or sponsors); and to specify the types of measures required to protect the security and privacy of personally identifiable health care information. Also known as the Kennedy-Kassebaum Bill, the Kassebaum-Kennedy Bill, K2, or Public Law 104-191.

(<http://www.hhs.gov/ocr/privacy/hipaa/administrative/securityrule/index.html>)

**HMIS: Homeless Management Information System**

CMIS: Client Management Information System

A Homeless Management Information System (HMIS) is a software application designed to record and store client-level information on the characteristics and service needs of homeless persons. An HMIS is typically a web-based software application that homeless assistance providers use to coordinate care, manage their operations, and better serve their clients.

In order to be competitive for homeless funding administered by the U.S. Department of Housing and Urban Development (HUD), agencies that coordinate a Continuum of Care system must have. If you receive HUD funding, you will be required by your Continuum of Care Coordinator, or HUD, to use the appropriate HMIS.

**To be covered by HIPAA, you must be:**

- A health plan;
- A health care clearinghouse;
- A health care provider who transmits any health information in electronic form in connection with a covered transaction.

**NW Social Service Connections CMIS/HMIS is not a covered entity and because:**

- NW Social Service Connections CMIS/HMIS is not a health plan;
- NW Social Service Connections CMIS/HMIS is not a clearinghouse;
- NW Social Service Connections CMIS/HMIS is not a provider of health care;
- Any agencies/programs that may be covered independent of the CMI/HMIS do not use the CMIS/HMIS for electronic financial collections;
- NW Social Service Connections CMIS/HMIS does not do any of the standard transactions that would make it be covered by HIPAA.

**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

The following forms are provided for Participant guidance only. Participants may use their own forms for Notice to Clients of Uses & Disclosures and Intake, Consent/Release of Information, providing they cover essentially the same information.

Attachment F – Notice of Uses and Disclosures, Intake and Consent/Release of Information

**NW Social Service Connections  
Notice to Clients of Uses & Disclosures  
Privacy Notice to Clients**

This notice tells you about how we use and disclose your private personal information. It tells you about your rights and our responsibilities to protect the privacy of your private personal information. It also tells you how to notify us if you believe that we have violated any of your rights or any of our responsibilities.

We are required by law to maintain the privacy of your private personal information. We must follow the terms of this notice that are currently in effect.

We reserve the right to change this Notice at any time. This Notice is not a legal contract. If this notice is changed, a copy of the revised notice will be available upon request or posted on our website.

You may request a copy of our notice at any time. For more information about our privacy practices, or for additional copies of this notice, please contact us using the information listed at the end of this notice.

---

We will enter the information you provide our agency into a computerized record-keeping system called ServicePoint. Several local agencies take part in this implementation of ServicePoint™ in order to better organize and deliver services to homeless or near homeless individuals and families in Multnomah, Clackamas, and Washington Counties. Our goal is to improve efforts to work together to understand and end homelessness. Information you provide will play an important role, including:

- Helping us prioritize, plan, and provide meaningful services to you and your family;
- Assisting our agency to improve its work with families and individuals that are homeless;
- Allowing local agencies to work better together to end homelessness;
- Providing statistics for local, state, and national policy makers to set effective goals.

**How your personal information may be used**

- Information you provide and services you receive will be entered into ServicePoint.
- Information you provide will be used for administrative and operational purposes to improve, provide and coordinate services that can be offered you.
- Information you provide will be used for functions related to payment or reimbursement for services.
- Information you provide will be used to monitor program effectiveness.

## Washington County, Oregon Continuum of Care Agency Participation Agreement

- Information you provide will be used to prepare aggregate reports and statistical information without personal identifying information.
- Information you provide concerning substance abuse, mental health, HIV, and domestic violence will not be shared with NWSSC CMIS/HMIS Partner agencies, unless specifically authorized by you.
- Personal identifying information will not be disclosed to any third-party, unless authorized by you or required by law.
  - Authorization not required for certain disclosures to government agencies or legal processes
    - Uses and disclosures required by law
    - Public health, health oversight and regulatory agency activities
    - Cases of neglect, abuse or domestic violence
    - Judicial and administrative proceedings
    - Law enforcement investigations
    - Deceased individuals and organ donors
    - Serious threats to health or safety
    - Disclosure of “de-identified” health information

### How will my information be kept secure?

- The computer program we use has the highest degree of security protection available.
- Persons with access to ServicePoint data shall not issue reports containing personal identifying information.
- NWSSC CMIS/HMIS is governed by federal, state, county, city and local privacy policies. System-wide access to personally identifying information contained in ServicePoint shall be limited System Administrators. System Administrators have been screened and are employed by a lead organization and have an Intergovernmental Agreement in place.
- Personal identifying information, like your name or birth date, will be viewed only by people working to provide services to you or by administrators providing technical assistance. Personal identifying information will be removed before reports are issued to local, state, or national agencies.
- All ServicePoint users receive training in privacy protection and have received copies of this privacy policy and have signed a confidentiality agreement pledging to adhere to its requirements.

### Know your information rights!

As a Client receiving services from a NWSSC CMIS/HMIS Participating agency, you have the following rights:

1. Determine the level of disclosure of your information; allow or refuse to share your information with NWSSC CMIS/HMIS participating agencies.
2. May terminate the Release of Information at any time, by providing this service provider written notice.
3. Right to request entrance into the database as an anonymous client or a restricted client.
4. Are entitled to a copy of this notice.
5. Reasonable accommodation. The agency you are seeking services from must make reasonable accommodations to ensure that you understand your information rights.



**Washington County, Oregon Continuum of Care  
Agency Participation Agreement**

6. Access to your record. You have the right to review your ServicePoint record, obtain a printed copy of your data, and have information that you do not understand explained to you.
7. Correction of your record. You have the right to have your record corrected so that information is up-to-date, accurate, and to ensure fairness in its use. Disagreements over the accuracy of information shall be subject to the agency grievance process and any uncorrected disagreement shall be noted in your ServicePoint record.
8. Refusal. You will not be denied services for which you are otherwise eligible if you refuse to consent to the sharing with other provider agencies of data that has been entered into ServicePoint. If you have safety concerns, please discuss this with a staff member.
9. Grievance: You have the right to be heard if you feel that you have been unjustly served, put at personal risk, or harmed. Employees or agencies that misuse information are subject to reprimands, warnings, and dismissal from the NWSSC CMIS/HMIS. The agency must make their written grievance policy available to you.
10. Data Archival: All personally identifying data will be archived from ServicePoint no later than seven years after being entered or after last being modified.
11. Amendments: The terms of this privacy notice may be amended at any time and all amendments will be effective with respect to previously obtained information.
12. Privacy Policy Questions & Complaints: All questions or complaints regarding this agency's privacy and data security practices may be pursued through the agency grievance process.

**CMIS/HMIS Intake Form**  
**Agency or Event Name**

Any individual with a disability or other medical need who needs accommodation with respect to this form should inform (Designated Person/Agency).

**Date Intake Form Completed (Assessment Date):** \_\_\_\_\_

**Section 1: Household**

**A. Household Type:** Select the household type that best describes your household. Please select only one.

- ☐ Single Individual      ☐ Female Single Parent      ☐ Male Single Parent      ☐ Two Parent Family  
☐ Grandparent(s) and Child(ren)      ☐ Foster Parent(s)      ☐ Couple with No Children      ☐ Non-Custodial Caregivers  
☐ Other (explain): \_\_\_\_\_

**B. Household Demographics.** Starting with the Head of the Household, list all members of the household. Use the correct legal name for each member as it appears on his/her Social Security Card or INS documents.

Name <i>Last, First</i>	Relationship to Head of Household	Date of Birth	Gender	Race* (Select as many as apply)	Ethnicity*	Disability (Yes/No)	Disability Type* (if applicable)	Social Security Number
	Head of the Household		<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African- American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Other <input type="checkbox"/> White	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Alcohol Abuse <input type="checkbox"/> Developmental Disability <input type="checkbox"/> Drug Abuse <input type="checkbox"/> HIV/AIDS <input type="checkbox"/> Mental Illness <input type="checkbox"/> Physical/Medical <input type="checkbox"/> Physical/Mobility <input type="checkbox"/> Other disability not listed <input type="checkbox"/> Prefer not to answer	- - - -or- <input type="checkbox"/> I don't know or don't have one <input type="checkbox"/> I choose not to provide the SSN.
			<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African- American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Other <input type="checkbox"/> White	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Alcohol Abuse <input type="checkbox"/> Developmental Disability <input type="checkbox"/> Drug Abuse <input type="checkbox"/> HIV/AIDS <input type="checkbox"/> Mental Illness <input type="checkbox"/> Physical/Medical <input type="checkbox"/> Physical/Mobility <input type="checkbox"/> Other disability not listed <input type="checkbox"/> Prefer not to answer	- - - -or- <input type="checkbox"/> I don't know or don't have one <input type="checkbox"/> I choose not to provide the SSN.
			<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African- American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Other <input type="checkbox"/> White	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Alcohol Abuse <input type="checkbox"/> Developmental Disability <input type="checkbox"/> Drug Abuse <input type="checkbox"/> HIV/AIDS <input type="checkbox"/> Mental Illness <input type="checkbox"/> Physical/Medical <input type="checkbox"/> Physical/Mobility <input type="checkbox"/> Other disability not listed <input type="checkbox"/> Prefer not to answer	- - - -or- <input type="checkbox"/> I don't know or don't have one <input type="checkbox"/> I choose not to provide the SSN.
			<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African- American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Other <input type="checkbox"/> White	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Alcohol Abuse <input type="checkbox"/> Developmental Disability <input type="checkbox"/> Drug Abuse <input type="checkbox"/> HIV/AIDS <input type="checkbox"/> Mental Illness <input type="checkbox"/> Physical/Medical <input type="checkbox"/> Physical/Mobility <input type="checkbox"/> Other disability not listed <input type="checkbox"/> Prefer not to answer	- - - -or- <input type="checkbox"/> I don't know or don't have one <input type="checkbox"/> I choose not to provide the SSN.
			<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African- American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Other <input type="checkbox"/> White	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Alcohol Abuse <input type="checkbox"/> Developmental Disability <input type="checkbox"/> Drug Abuse <input type="checkbox"/> HIV/AIDS <input type="checkbox"/> Mental Illness <input type="checkbox"/> Physical/Medical <input type="checkbox"/> Physical/Mobility <input type="checkbox"/> Other disability not listed <input type="checkbox"/> Prefer not to answer	- - - -or- <input type="checkbox"/> I don't know or don't have one <input type="checkbox"/> I choose not to provide the SSN.
			<input type="checkbox"/> Male <input type="checkbox"/> Female	<input type="checkbox"/> American Indian or Alaskan Native <input type="checkbox"/> Asian <input type="checkbox"/> Black or African- American <input type="checkbox"/> Native Hawaiian or Pacific Islander <input type="checkbox"/> Other <input type="checkbox"/> White	<input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Alcohol Abuse <input type="checkbox"/> Developmental Disability <input type="checkbox"/> Drug Abuse <input type="checkbox"/> HIV/AIDS <input type="checkbox"/> Mental Illness <input type="checkbox"/> Physical/Medical <input type="checkbox"/> Physical/Mobility <input type="checkbox"/> Other disability not listed <input type="checkbox"/> Prefer not to answer	- - - -or- <input type="checkbox"/> I don't know or don't have one <input type="checkbox"/> I choose not to provide the SSN.

\* This information is voluntary and is used for statistical purposes only.

Please continue to the next page ➞

Section 2: Contact Information.

Mailing Address: \_\_\_\_\_  
(Street Address and Apartment, or PO Box)

(City) \_\_\_\_\_ (State) \_\_\_\_\_ (Zip) \_\_\_\_\_

Telephone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Section 3: Household Income and Benefits.

A. Income and Cash Benefits

Has any member of the household received any **income or cash benefits** in the last 30 days? ..... ☐ Yes ☐ No

If yes, please indicate the monthly amount from each of the following sources:

Income Type	Monthly Amount	Who?	Approx. Date Income Began	Income Type	Monthly Amount	Who?	Approx. Date Income Began
Alimony or Spousal Support	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____		Social Security	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____	
Child Support	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____		SSDI	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____	
Earned Income	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____		SSI	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____	
Pension	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____		TANF	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____	
Private Disability Insurance	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____		Unemployment	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____	
Self Employment	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____		Veteran's Disability	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____	
Other: _____	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____		Veteran's Pension	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____	
Other: _____	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____		Worker's Compensation	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____	

B. Non-Cash Benefits

Has any member of the household received any **non-cash benefits** in the last 30 days? ..... ☐ Yes ☐ No

If yes, please indicate the monthly amount from each of the following sources:

Benefit Type	Monthly Amount, if known	Who?	Approx. Date Benefit Began	Benefit Type	Monthly Amount, if known	Who?	Approx. Date Benefit Began
Food Stamps (aka "SNAP")	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____		TANF Child Care Services	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____	
Medicaid	N/A	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____		TANF Transportation Services	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____	
Medicare	N/A	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____		Other TANF-Funded Services	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____	
SCHIP	N/A	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____		Rental Subsidy (Section 8, HUD)	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____	
Spec. Supp. Nutrition, aka WIC	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____		Other: _____	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____	
VA Medical Services	N/A	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____		Other: _____	\$	<input type="checkbox"/> Head of Household <input type="checkbox"/> Other: _____	

Section 4: Housing Status and Other Demographics

A. Where have you been living or staying up until today? Please check one:

- ☐ Emergency Shelter (including hotel/motel voucher)
- ☐ Foster Care Home or Group Home
- ☐ Hospital (Non-Psychiatric)
- ☐ Hotel or Motel Paid Without Emergency Shelter Voucher
- ☐ Jail, Prison, or Juvenile Facility
- ☐ Other:  
\_\_\_\_\_
- ☐ Owned by me  
☐With Subsidy or ☐Without Subsidy
- ☐ Permanent Housing for Formerly Homeless Persons
- ☐ Psychiatric Hospital or Facility
- ☐ Rental by me  
☐With VASH Housing Subsidy or  
☐With Other Housing Subsidy (i.e. Section 8)  
☐Without Subsidy
- ☐ Safe Haven
- ☐ Staying with Family
- ☐ Staying with Friends
- ☐ Substance Abuse Treatment Facility
- ☐ Transitional Housing
- ☐ Don't know
- ☐ Prefer not to answer.

B. How long have you been staying in the situation above?

- ☐ One week or less
- ☐ One to three months
- ☐ One year or longer
- ☐ More than one week, but less than one month
- ☐ More than three months, but less than one year

What is/was the zip code of your last permanent address? \_\_\_\_\_ ☐Don't know ☐Prefer not to answer

Are you/your household currently homeless?..... ☐Yes ☐No

Are you a victim of Domestic Violence?..... ☐Yes ☐No ☐Prefer not to answer

Are you a US Military Veteran? ..... ☐Yes ☐No ☐Prefer not to answer

Notice of Use.

Agency or Event Name provides services through a variety of funding sources, which may include government grants, public funds, or grants from private foundations. Agency or Event Name is required to collect and report on certain information to account for how these funds are used. In addition, this information may aid the effort to end homelessness by demonstrating how many individuals and families in the area need services.

For this reason, you have been asked to provide the information on this form. The information you have provided will be entered into a Homeless Management Information System (HMIS) and used to provide statistical information about services provided to homeless persons (or persons at risk of homelessness) in LOCAL County and the metropolitan area.

Your identifying information will be kept as confidential as possible: it will only be seen by persons employed by or volunteering with Agency or Event Name, and persons administering or auditing the HMIS.

Signature of the Head of the Household

Date

Spouse/Other Adult

Date

# **NW Social Service Connections**

## **Notice to Clients of Uses & Disclosures**

### **Privacy Notice**

- Our agency enters personal and demographic information about you into a computerized record-keeping system.
- The information is used to plan delivery of services & to provide statistical information for setting goals.
- Information you provide will be used for administrative and operational purposes to improve, provide & coordinate services that can be offered you.
- Information you provide will be used for functions related to payment or reimbursement for services, monitor program effectiveness, and to prepare reports and statistical information without personal identifying information.
- If you have safety concerns, you may not want personal information entered into the system, you should discuss this with a staff member.
- Personally identifying information will be seen only by staff members who provide you with services and a small number of people (ie: program funders) who maintain the computerized record-keeping system, except as required by law.
- Your personally identifying information will not be shared with other agencies unless you sign a Release of Information, which you may withdraw at any time.
- You will not be denied services, if you refuse to consent to share data.
- You have the right to see your record and to ask that it be corrected.
- You have the right to file a grievance if you feel you have been harmed in some way by the use of the computerized data system.

**THIS IS NOT A COMPLETE STATEMENT OF YOUR INFORMATION RIGHTS. For a complete statement of your information rights, please ask a staff person for a copy of our Privacy Policy. If you have any questions about our computerized record-keeping system and how it might affect you, feel free to talk about your concerns with a staff member.**

# NW Social Service Connections

(Washington County, Oregon)

## User Agreement

**Printed User Name:** \_\_\_\_\_

**Organization:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

### Statement of Confidentiality

Employees, volunteers, and any other persons with access to NW Social Service Connections CMIS/HMIS are subject to certain guidelines regarding use of ServicePoint™. ServicePoint™ contains personal and private information on individuals and all such information must be treated carefully and professionally by all who access it.

Guidelines for use of ServicePoint include:

- The User shall comply with all data standards and policies and procedures.
- ServicePoint™ User Identification and Passwords must be kept secure and are not to be shared.
- Information obtained from ServicePoint™ is to remain confidential, even if my relationship with the organization listed above changes or concludes for any reason.
- The CHO must post a privacy notice describing its policies and practices for the processing of PPI. The User must offer to explain any information that the individual does not understand, and must provide a copy of its privacy notice to any individual upon request.
- Informed client or guardian consent, as documented by a Release of Information form, is required for any data sharing, or disclosure of identifying information and service transactions via ServicePoint™.
- If a client or guardian chooses not to sign Release of Information form, all client information must be closed with no exceptions
- Only general, non-confidential information is to be entered in the “other notes/comments” section of the Client Profile on ServicePoint™. Confidential information, including TB diagnosis, HIV diagnosis or treatment information, domestic violence and mental and/or physical health information, is not permitted to be entered in this section.
- Client records only pertaining to user’s assigned work duties will be accessed.
- Only individuals that exist as clients under the Organization’s jurisdiction may be entered into ServicePoint™.
- Misrepresentation of the client base by entering known, inaccurate information is prohibited.
- Client records are not to be deleted from ServicePoint™, contact NWSSC CMIS/HMIS System Administrators for appropriate action.
- Discriminatory comments based on race, color, religion, national origin, ancestry, handicap, age, sex, and sexual orientation are not permitted in ServicePoint™. Profanity and offensive language are not permitted in ServicePoint™.
- ServicePoint™ is to be used for business purposes only.
- Transmission of material in violation of any United States Federal or State of Oregon regulations or laws is prohibited and includes material that is copyrighted, legally judged to be threatening or obscene, and considered protected by trade secret. ServicePoint™ will not be used to defraud the Federal, State, or local government or an individual entity or to conduct any illegal activity.
- Any unauthorized use, access or unauthorized modification to ServicePoint™ computer system information or interference with normal system operations will result in immediate suspension of your access to ServicePoint™ and may jeopardize your ServicePoint access and/or your employment status.

# NW Social Service Connections

(Washington County, Oregon)

## User Agreement

- ServicePoint™ shall only be accessed from the Organization's network, desktops, laptops, mini-computers and any other electronic devices that are web capable. In special circumstances access from remote locations may be permitted after application and approval by both the Agency and System Administrators.
- The User is expected to physically enter the password each time he or she logs on to the system. DO NOT Save passwords in auto-complete settings.
- Should the User download client identifiable information in any format, he or she will securely store and/or dispose of all electronic and hardcopy in a manner to protect the client's personal information. At a minimum this will require the use of strong password protection, preferably including encryption.
- This agreement will be superceded by any additional or alternative agreements presented by NWSSC CMIS/HMIS System Administrators.

Failure to comply with the provisions of this Statement of Confidentiality may result in the termination of the User License or Agency Participation. Your signature below indicates your agreement to comply with this statement of confidentiality. There is no expiration date of this agreement, and may be renewed when System Administrators see the need.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name and Title

\_\_\_\_\_  
Witness Printed Name and Title

\_\_\_\_\_  
Date

The User Agreement/Statement of Confidentiality should be kept on file at the Organization or returned to the appropriate lead organization when requested. Forms for individuals no longer employed by the Participant should be kept on file for seven years following date of termination. System Administrators may, at any time, monitor compliance.

### Washington County HMIS System Administrator

Veronica Clevidence

Washington County Department of Housing Services

111 NE Lincoln Street, Suite 200-L

Hillsboro, OR 97124

503-846-4773

veronica\_clevidence@co.washington.or.us

\_\_\_\_\_  
User to mirror

Internal Use Only:

Login \_\_\_\_\_

Login Provider \_\_\_\_\_

Access Level \_\_\_\_\_

ART License \_\_\_\_\_

# NW Social Service Connections

## REMOTE ACCESS POLICY

ServicePoint™ is intended only be accessed on-site from the Organization's network, desktops, laptops, mini-computers and any other electronic devices that are web capable .

In special circumstances access from remote locations may be permitted after application and approval by both the Agency and System Administrators.

The Remote Access Policy and Agreement is an extension of the User Agreement and NWSSC CMIS/HMIS Policies and Procedures. The USER shall comply with all Policies, Procedures, Agreements and all rules associate with NWSSC CMIS/HMIS.

The Agency Administrator has the responsibility to assure the user is in compliance with this and all other Policies, Procedures, Agreements and rules associated with NWSSC CMIS/HMIS. The Agency Administrator will regularly, at least annually, audit remote access by associating dates and times to the user's time sheet.

All staff that accesses the database remotely must meet the standards detailed in the System Security (see Policy and Procedures) and may only access it for activities directly related to their job.

### Examples of Remote Access:

- Community Agency offices on secure networks to support agency use of the system.
- Training Centers on secure networks when providing services or training in the field.
- Private Agency Onsite Residence Offices on secure networks to complete assigned work duties.
- Agency Administrators or System Administrators only: Private Home office on secure networks to provide system support as needed.

### Requirements for Remote Access of NWSSC CMIS/HMIS include:

- System security provisions will apply to all systems where NWSSC CMIS/HMIS is accessed.
- User must certify compliance all NWSSC CMIS/HMIS Policies, Procedures and Agreements.
- User must follow all confidentiality and privacy rules.
- User must assure access only access for activities directly related to their job.
- Remote access will only be on secure networks. (You will not access NWSSC CMIS/HMIS on any non-protected, free, or other network or Wi-Fi).
- Data containing client identifiable information will not be downloaded to any remote access site at any time for any reason.
- Data downloaded for purposes of statistical analysis will exclude client identifiable information.
- All CMIS/HMIS data (electronic and hardcopy), will be securely stored and/or disposed of in such a manner to protect the information.

Application for remote access must be made by completing NWSSC CMIS/HMIS Remote Access Agreement and submitting completed form to the Agency Administrator.

Upon receipt that Agency Administrator will review and confirm the need for applicant to have remote access. The signed agreement will then be forwarded to the System Administrator for final approval.

The System Administrator will sign and retain the NWSSC CMIS/HMIS Remote Access Agreement, thus authorizing remote access for the identified user. The System Administrator will advise both the Agency Administrator and the User that approval has been granted.

Violation of this or any NWSSC CMIS/HMIS policy or agreement may result in the termination of the User License or Agency Participation.



# NW Social Service Connections

## Remote Access Agreement

I, \_\_\_\_\_ (Name), am applying for Remote Access Authorization for NWSSC CMIS/HMIS.

I require remote access for the purpose of: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Location/Site for remote access: \_\_\_\_\_ IP Address: \_\_\_\_\_  
(If Known)

Dates/Times for remote access: \_\_\_\_\_

My ServicePoint Login is: \_\_\_\_\_ Agency: \_\_\_\_\_

Program(s): \_\_\_\_\_

I certify that I have read and will comply with the Remote Access Policy. I am and will be in compliance with all Policies, Procedures, Agreements and rules associate with NWSSC CMIS/HMIS.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

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As Agency Administrator I have reviewed this application. I find it is a valid and active request. I support and approve this application for Remote Access. I understand that it is my responsibility to assure the user is in compliance with this and all other Policies, Procedures, Agreements and rules associate with NWSSC CMIS/HMIS. I will frequently audit remote access by associating dates and times to the user's time sheet.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Email: \_\_\_\_\_ Phone: \_\_\_\_\_

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Approved - System Administrator

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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